Tab 1 SB 846 by Gainer (CO-INTRODUCERS) Steube; (Similar to CS/H 01005) Sheriffs Providing Child Protective Investigative Services

Tab 2 CS/SB 1232 by CF, Baxley; (Similar to H 00643) Public Assistance Fraud

Tab 3	CS/SB	150 k	oy BI, Lee ;	(Compare to CS/1ST ENG/H 0	0019) Motor Vehicle Insurance	
216138		S	UNFAV	AHS, Rouson	Delete L.1821:	02/28 10:09 PM
902566	Α	S	UNFAV	AHS, Lee	btw L.1936 - 1937:	02/28 10:09 PM
888902	Α	S	UNFAV	AHS, Lee	Delete L.2886 - 2901:	02/28 10:09 PM
589602	Α	S	FAV	AHS, Lee	btw L.2932 - 2933:	02/28 10:09 PM
371248	D	S	UNFAV	AHS, Passidomo	Delete everything after	02/28 10:09 PM
177304	–SD	S	WD	AHS, Rouson	Delete everything after	02/28 10:09 PM
244072	D	S	UNFAV	AHS, Lee	Delete everything after	02/28 10:09 PM
236916	AA	S	L FAV	AHS, Rouson	Delete L.1642:	02/28 10:09 PM
352738	SD	S	L UNFAV	AHS, Passidomo	Delete everything after	02/28 10:09 PM

The Florida Senate

COMMITTEE MEETING EXPANDED AGENDA

APPROPRIATIONS SUBCOMMITTEE ON HEALTH AND HUMAN SERVICES Senator Flores, Chair Senator Stargel, Vice Chair

MEETING DATE: Wednesday, February 28, 2018

TIME: 4:00—6:00 p.m.

PLACE: James E. "Jim" King, Jr. Committee Room, 401 Senate Office Building

MEMBERS: Senator Flores, Chair; Senator Stargel, Vice Chair; Senators Baxley, Book, Passidomo, Rader, and

Rouson

TAB	BILL NO. and INTRODUCER	BILL DESCRIPTION and SENATE COMMITTEE ACTIONS	COMMITTEE ACTION
1	SB 846 Gainer (Similar CS/H 1005, Compare CS/CS/S 1360)	Sheriffs Providing Child Protective Investigative Services; Requiring the Sheriff of Walton County to provide all child protective investigations in the county beginning with a specified fiscal year, etc.	Favorable Yeas 7 Nays 0
		CF 02/06/2018 Favorable AHS 02/28/2018 Favorable AP	
2	CS/SB 1232 Children, Families, and Elder Affairs / Baxley (Similar H 643)	Public Assistance Fraud; Revising the maximum reward paid to persons providing certain information leading to the recovery of certain fraudulent public assistance payments; directing state-retained shares of recovered public assistance overpayments to be held in the Federal Grants Trust Fund, etc.	Favorable Yeas 7 Nays 0
		CF 01/22/2018 Fav/CS AHS 02/28/2018 Favorable AP	
3	CS/SB 150 Banking and Insurance / Lee (Compare CS/H 19)	Motor Vehicle Insurance; Repealing provisions relating to application of the Florida Motor Vehicle No-Fault Law; revising garage liability insurance requirements for motor vehicle dealer applicants; requiring specified motor vehicle liability insurance policies to include medical payments coverage; providing insurers a civil cause of action against certain persons who are convicted of or plead guilty or nolo contendre to certain acts of insurance fraud associated with claims for medical payments coverage benefits, etc.	Temporarily Postponed
		BI 12/05/2017 Temporarily Postponed BI 01/10/2018 Fav/CS AHS 02/28/2018 Temporarily Postponed AP	

The Florida Senate BILL ANALYSIS AND FISCAL IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

Prepared	d By: The Prof	essional Sta	aff of the Approp	riations Subcommi	ttee on Health and Human Services	
BILL:	SB 846					
INTRODUCER:	Senators Gainer and Steube					
SUBJECT: Sheriffs Providing Child Protective Investigative Services						
DATE:	February 2	7, 2018	REVISED:			
ANAL	YST	STAFF	DIRECTOR	REFERENCE	ACTION	
1. Preston		Hendo	n	CF	Favorable	
2. Sneed		Williams		AHS	Recommend: Favorable	
3.				AP		

I. Summary:

The bill requires the Walton County Sheriff to assume responsibility for child protective investigations beginning with the 2018-2019 fiscal year.

This bill does not affect state or local expenditures.

The bill is effective upon becoming law.

II. Present Situation:

Background

Child protective investigation units are responsible for receiving and responding to reports of child abuse and neglect, which involves determining whether the report meets the criteria to be accepted for a protective investigation, gathering information, and determining whether child maltreatment occurred or the child is at risk of abuse or neglect.

The Department of Children and Families (DCF or department) has been authorized to enter into contracts with county sheriffs to provide child protective investigations since 1998. Currently, the department is responsible for performing child protective investigations in 61 counties statewide. Sheriff's offices in the remaining six counties are responsible for performing child protective investigations.

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¹ Section 39.3065, F.S.

² Section 39.3065, F.S. authorizes the department to enter into grant agreements with the sheriff of any county to perform child protective investigations. Broward, Manatee, Pasco, and Pinellas are named in statute. Hillsborough and Seminole counties currently perform child protective investigations, but are not specifically named in the statute.

The department employs 12 full-time equivalent (FTE) positions to conduct child protective investigations in Walton County.³

The department is also required to enter into agreements with the jurisdictionally responsible county sheriffs' offices and local police departments that will assume the lead in conducting any potential criminal investigations arising from allegations of child abuse, abandonment, or neglect.⁴ The following types of calls to the hotline are automatically transferred to the appropriate county sheriff's office:

- Reports of known or suspected child abuse by an adult other than a parent, legal custodian, caregiver, or other person responsible for the child's welfare, as defined in s. 39.01, F.S.;
- Reports involving juvenile sexual abuse or a child who has exhibited inappropriate sexual behavior; and
- Reports of an instance of known or suspected child abuse involving impregnation of a child under 16 years of age by a person 21 years of age or older solely under s. 827.04(3), F.S.⁵

All child protective investigations, regardless of the entity administering this function, must be done in accordance with state and federal laws and regulations. The county sheriffs must conduct investigations, at a minimum, in accordance with the performance standards and outcome measures established by the legislature for protective investigations conducted by the department. Each individual child protective investigator must complete, at a minimum, the training provided to and required of protective investigators employed by the department.⁶

Funds for providing child protective investigations must be identified in the annual appropriation made to the department, which shall award grants to the respective sheriffs' offices. Funds for child protective investigations may not be integrated into the sheriffs' regular budgets. Budgetary data and other data relating to the performance of child protective investigations must be maintained separately from all other records of the sheriffs' offices and reported to the department as specified in the grant agreement.⁷

The sheriffs' grants are funded from several funding sources, including state general revenue, the Welfare Transition Trust Fund (Temporary Assistance for Needy Families Block Grant), the Social Services Block Grant Trust Fund, the Child Welfare Training Trust Fund, and the Federal Grants Trust Fund. Federal funds are provided to the department as the agency of record for the State of Florida. The department is required to complete a number of reports to the federal government, including certifications as to how the funding is spent and that the expenses meet federal guidelines and sufficient state matching funds are available. These funds, according to federal guidelines, must be appropriated to the agency of record.⁸

The department is required to submit an annual report regarding quality performance, outcomemeasure attainment, and cost efficiency to the President of the Senate, the Speaker of the House

³ The Department of Children and Families, 2018 Agency Legislative Bill Analysis for SB 846, November 17, 2017.

⁴ Section 39.306, F.S.

⁵ Section 39.201, F.S.

⁶ Section 39.3065, F.S.

⁷ *Id*.

⁸ The Department of Children and Families, 2017 Agency Legislative Bill Analysis for SB 846, November 17, 2017.

of Representatives, and to the Governor no later than January 31 of each year the sheriffs are receiving general appropriations to provide child protective investigations.⁹

Numbers of Investigations¹⁰

The following table shows the number of child protective investigations performed by each sheriffs' office and the department over a three year period.

County Sheriff	FY 2013-14 FY 2014-15 FY 2015-16		FY 2015-16
	Number of Investigations	Number of Investigations	Number of Investigations
Broward	13,509	14,293	13,785
Hillsborough	11,539	11,686	11,913
Manatee	4,125	4,087	4,265
Pasco	5,115	5,261	5,462
Pinellas	9,365	9,338	9,100
Seminole	4,007	3,967	4,016
All Sheriffs	47,660	48,632	48,541
Department	136,212	137,872	142,680

Performance

The DCF and sheriffs generally use similar investigative processes and procedures, although the higher level of funding for the sheriffs results in their investigators having greater resources than typically available to the DCF investigators. Due to their law enforcement affiliation, child abuse investigators working for sheriffs also generally have greater access to training and specialists, as well as enhanced cooperation and community respect not always afforded to DCF investigators. ¹¹ The additional resources available to sheriffs' offices enhanced their investigators' ability to perform job duties and the offices ability to attract and retain experienced investigators. Sheriffs:

- Have slightly lower overall investigator caseloads;
- Tend to have more investigative aides and support staff positions;
- Provide vehicles for investigators;
- Provide investigator uniforms;
- Provide additional equipment to investigators;
- Provide supplies for children awaiting placement, including diapers, formula, food, and clothes;
- Have well-equipped visitation rooms with furniture, rugs, toys, television, games, kitchens, and bathrooms to provide children with a comfortable and safe environment after removal, further enabling investigators to perform their job more easily;

⁹ Id

¹⁰ Data provided by Senate Appropriations professional staff.

¹¹ The Florida Legislature, Office of Program Policy Analysis and Government Accountability, Research Memorandum, *Sheriff's Offices Have Advantages for Conducting Child Abuse Investigations, but Quality Cannot be Directly Compared to DCF*, February 26, 2010.

 Provide investigators with office space either in the sheriff's office or collocated with or near community-based care lead agencies, which facilitates communication between supervisors and investigators and enhances accountability; and

 Often provide higher salaries for investigators, which enhances morale and also contributes to lower turnover. In addition to higher salaries, sheriffs' child protective investigators are normally awarded merit and cost-of-living raises.¹²

Child protective investigation units administered by sheriffs' offices also have advantages that are not entirely due to their higher state funding. Because sheriff's offices are law enforcement agencies, they can provide protective investigators with access to training and resource specialists, and a higher degree of cooperation with local law enforcement agencies and the community.¹³

However, the higher funding and other advantages enjoyed by the sheriff's offices does not appear to result in better outcomes. ¹⁴ The table below shows the difference in performance between the department and the sheriffs' offices on the measure of non-recurrence of maltreatment within six months of case closure. The federal Administration for Children and Families non-recurrence standard is 94.6%. ¹⁵

County Sheriff		Non-Recurrence of Maltreatment Within Six Months of Case Closure						
	August 2015	September 2015	October 2015	November 2015	December 2015	January 2016	February 2016	March 2016
Broward	94.96	93.90	95.15	93.58	93.59	93.08	94.39	91.07
Hillsborough	95.88	97.03	95.32	97.13	95.77	92.11	95.81	97.01
Manatee	95.45	93.75	96.23	96.88	96.40	91.80	93.26	91.60
Pasco	97.06	94.62	96.09	96.40	98.41	90.83	97.70	97.22
Pinellas	92.21	91.38	94.39	92.89	93.00	95.00	93.98	90.77
Seminole	93.78	89.13	93.26	91.43	92.90	93.37	91.85	93.72
Sheriff Average	94.89	93.30	95.07	94.71	95.01	92.82	94.50	93.56
Department Average	95.01	96.20	94.89	95.24	95.93	94.75	94.31	96.11

¹² *Id*.

¹³ Id

¹⁴ The Florida Legislature, Office of Program Policy Analysis and Government Accountability, Research Memorandum, *Sheriffs' Offices and DCF Perform Similarly in Conducting Child Protective Investigations*, May 28, 2010.

¹⁵ The Department of Children and Families, Florida Sheriffs Performing Child Protective Investigations, Annual Program Performance Evaluation Report, Fiscal Year 2015-2016, *available at*:

http://centerforchildwelfare.fmhi.usf.edu/kb/LegislativeMandatedRpts/AnnualSheriffPerfRptFY15-16.pdf. (last visited February 2, 2018).

Cost

The following table provides a 3-year funding history that includes total funding amounts and cost per investigation for each of the six counties where the sheriff provides child protective investigations and the department.¹⁶

County Sheriff	FY 20	7 2013-14 FY 2014-15		14-15	FY 2015-16	
	Funding	Cost Per	Funding	Cost Per	Funding	Cost Per
		Investigation		Investigation		Investigation
Broward	\$14,565,620	\$1,078	\$15,054,474	\$1,053	\$15,054,474	\$1,130
Hillsborough	\$12,254,683	\$1,062	\$13,430,952	\$1,149	\$13,430,952	\$1,127
Manatee	\$3,760,532	\$912	\$4,719,787	\$1,155	\$4,719,787	\$1,107
Pasco	\$5,591,619	\$1,093	\$6,241,374	\$1,186	\$6,241,374	\$1,143
Pinellas	\$10,240,024	\$1,093	\$11,828,667	\$1,267	\$11,828,667	\$1,300
Seminole	\$3,563,114	\$889	\$4,537,154	\$1,144	\$4,537,154	\$1,130
All Sheriffs \$49,975,592			\$55,812,408		\$55,812,408	
Department	\$111,777,077	\$821	\$133,870,553	\$971	\$138,028,685	\$967

III. Effect of Proposed Changes:

Section 1 amends s. 39.3065, F.S., relating to sheriffs of certain counties conducting child protective investigative services, to authorize the Walton County Sheriff to assume responsibility for the investigations beginning with the 2018-2019 fiscal year.

Section 2 provides an effective date of upon becoming law.

IV. Constitutional Issues:

A.	Municipality/County Mandates Restrictions:

None.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

¹⁶ Data provided by Senate Appropriations professional staff.

V. Fiscal Impact Statement:

A. Tax/Fee Issues:

None.

B. Private Sector Impact:

None

C. Government Sector Impact:

The bill requires the Walton County Sheriff's Office to assume responsibility for child protective investigations. The bill does not provide any funding for grants to offset the costs to be incurred by the sheriff's office. The Walton County sheriff's office may incur additional costs due to the transition, over and above the funding provided by the DCF, however, the costs are expected to be minimal.¹⁷

VI. Technical Deficiencies:

None.

VII. Related Issues:

None.

VIII. Statutes Affected:

This bill substantially amends section 39.3065 of the Florida Statutes.

IX. Additional Information:

A. Committee Substitute – Statement of Changes:

(Summarizing differences between the Committee Substitute and the prior version of the bill.)

None.

B. Amendments:

None.

This Senate Bill Analysis does not reflect the intent or official position of the bill's introducer or the Florida Senate.

¹⁷ The Department of Children and Families, 2018 Agency Legislative Bill Analysis for SB 1092, February 27, 2017.

Florida Senate - 2018 SB 846

By Senator Gainer

2-00398-18 2018846 A bill to be entitled

An act relating to sheriffs providing child protective investigative services; amending s. 39.3065, F.S.;

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requiring the Sheriff of Walton County to provide all child protective investigations in the county beginning with a specified fiscal year; providing an effective date. Be It Enacted by the Legislature of the State of Florida: Section 1. Paragraph (a) of subsection (3) of section 39.3065, Florida Statutes, is amended to read: 39.3065 Sheriffs of certain counties to provide child protective investigative services; procedures; funding .-(3) (a) Beginning in fiscal year 1999-2000, the sheriffs of Pasco County, Manatee County, Broward County, and Pinellas County shall have the responsibility to provide all child protective investigations in their respective counties. Beginning in fiscal year 2018-2019, the Sheriff of Walton County shall provide all child protective investigations in his or her county. Beginning in fiscal year 2000-2001, the Department of Children and Families is authorized to enter into grant agreements with sheriffs of other counties to perform child protective investigations in their respective counties. Section 2. This act shall take effect upon becoming a law.

Page 1 of 1

CODING: Words stricken are deletions; words underlined are additions.

THE FLORIDA SENATE



Tallahassee, Florida 32399-1100

COMMITTEES:

Transportation, Chair Commerce and Tourism, Vice Chair Appropriations Appropriations Subcommittee on Transportation, Tourism, and Economic Development Banking and Insurance

JOINT COMMITTEE: Joint Administrative Procedures Committee

SENATOR GEORGE B. GAINER

2nd District

February 7, 2018

Re: SB 846

Dear Chair Flores,

I am respectfully requesting Senate Bill 846, related to Sheriffs Providing Child Protective Investigative Services, be placed on the agenda for the next Appropriations Subcommittee on Health and Human Services.

I appreciate your consideration of this bill. If there are any questions or concerns, please do not hesitate to call my office at (850) 487-5002.

Thank you,

Senator George Gainer

District 2

Cc. Phil Williams, Tonya Kidd, Robin Jackson, Nicholas Alvarez, Demi Busatta, Lissette Vasquez

THE FLORIDA SENATE

APPEARANCE RECORD

Meeting Date	Bill Number (if applicable)
Topic WALTON COUNTY CHILD PROTEINAME TIM PARSON	
Job Title	
Address 113 & College Ave #40	Phone 941-1776
Street 3230	Email
	Vaive Speaking: In Support Against The Chair will read this information into the record.)
Representing WATON COUNTY SHORIF	FS OFFILA
Appearing at request of Chair: Yes No Lobbyist	registered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

S-001 (10/14/14)

S-001 (10/14/14)

THE FLORIDA SENATE

APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

2.28.18		or or condito i roloccional c	tan conducting the meeting)	846
Meeting Date				Bill Number (if applicable)
Topic Sheriffs Providing Child Pro	otective Investigat	ive Services	Amend	lment Barcode (if applicable)
Name Barney Bishop				
Job Title CEO				
Address 204 South Monroe Stree	et .		Phone 510-9922	2
Street Tallahassee	FL	32301	Email Barney@B	BarneyBishop.com
City	State	Zip		
Speaking: For Against	Information		peaking: In Suir will read this informa	
Representing Florida Smart J	ustice Alliance			
Appearing at request of Chair:	Yes 🗸 No	Lobbyist regist	ered with Legislate	ure: Yes No
While it is a Senate tradition to encourag meeting. Those who do speak may be as				
This form is part of the public record to	for this meeting.			S-001 (10/14/14

The Florida Senate BILL ANALYSIS AND FISCAL IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

Prepared	d By: The Prof	essional Staff of the Approp	riations Subcommi	ttee on Health and Human Services			
BILL:	CS/SB 123	32					
INTRODUCER:	Children, Families, and Elder Affairs Committee and Senator Baxley						
SUBJECT: Public Assistance Fraud							
DATE:	February 2	7, 2018 REVISED:					
ANAL	YST	STAFF DIRECTOR	REFERENCE	ACTION			
1. Hendon		Hendon	CF	Fav/CS			
2. Sneed		Williams	AHS	Recommend: Favorable			
3.			AP				

Please see Section IX. for Additional Information:

COMMITTEE SUBSTITUTE - Substantial Changes

I. Summary:

CS/SB 1232 requires that the state-retained share of recoveries made by the Department of Children and Families (DCF) from public assistance fraud must be deposited into the Federal Grants Trust Fund and must be used exclusively by the DCF in its efforts to combat public assistance fraud. The bill requires the DCF to develop a plan on how to use these funds, including the payment of awards to persons reporting fraud. The bill directs the DCF to report annually to the Legislature increases in the state's retained share of recoveries of public assistance overpayments.

To the extent the Legislature appropriates the state-retained share of recoveries for additional prevention or deterrence efforts, the bill may reduce public assistance fraud.

The bill is effective July 1, 2018.

II. Present Situation:

Public Assistance Programs

The Department of Children and Families (DCF) operates the Economic Self-Sufficiency program, also known as ACCESS. There are five services within the Economic Self-Sufficiency program, as described below.

• **Temporary Cash Assistance** provides cash assistance to families with children under the age of 18, or through age 18 if the 18-year-old is enrolled in high school full time. The program provides time-limited financial assistance and services intended to help families gain economic self-sufficiency. These families must meet the program's technical, income, and asset requirements.

- Food Assistance Program helps low income families meet their household nutritional needs by supplementing their purchasing power with a monthly benefit allotment based on the number of people in the household and how much money is left after countable expenses are subtracted. Families must meet the program's eligibility rules. Food assistance benefits may only be used to purchase groceries; they may not be used to purchase household items such as cleaning supplies, grooming items, tobacco, alcoholic beverages, or hot food.
- Relative Caregiver Program provides monthly cash assistance to relatives who have custody of a related child under age 18 who has been found to be dependent by a Florida court and placed in their home by a Community-Based Care Lead Agency. The monthly cash assistance amount is higher than a Temporary Cash Assistance payment for one child, but less than the amount paid for a child in the foster care program.
- Optional State Supplementation is a state-funded public assistance program that provides a monthly cash payments to indigent elderly or disabled individuals who live in special non-institutional, residential living facilities, including assisted living facilities, adult family care homes and mental health residential treatment facilities.
- Medicaid provides medical coverage to low-income individuals and families and the
 Economic Self-Sufficiency program determines eligibility for all Medicaid program
 participants, except for individuals who receive federal Supplemental Security Income (SSI)
 payments, as these individuals are automatically Medicaid eligible. The Medicaid program is
 administered by the Agency for Health Care Administration.

In addition, the state investigates fraud resulting from Disaster Assistance/Emergency benefits, the School Readiness and Voluntary Pre-Kindergarten programs, and Social Security Disability benefits.¹

Public Assistance Fraud

Section 414.39, F.S., specifies that someone who fails to disclose information used to determine their eligibility for public assistance, fails to disclose a change in circumstances that would affect their eligibility, or aids another person in the commission of any such act, commits a misdemeanor or felony, depending on the amount of the fraud.

Department of Children and Families

Section 414.39, F.S., also requires the DCF to create an error-prone or fraud-prone case profile within its public assistance information system and shall screen each application for public assistance, including food assistance, Medicaid, and temporary cash assistance, against the profile to identify cases that have a potential for error or fraud. Each case so identified shall be subjected to pre-eligibility fraud screening. If funded to do so, the DCF shall pay a reward to a person who furnishes and reports original information relating to a violation of the state's public

¹ Department of Financial Services, Division of Public Assistance Fraud website. https://www.myfloridacfo.com/division/PAF/ (last visited 1/18/18).

assistance fraud laws. In 2011, the DCF created the Public Benefits Integrity office to prevent and detect fraud, waste, and abuse in the public assistance programs, as well as to recover benefits that were erroneously paid. In Fiscal Year 2015-16, the office collected over \$22 million through benefit recovery.²

When benefits are overpaid, a claim is established by the DCF detailing the dollar amount of benefits within each public assistance program in which the recipient household may have participated. The claim amounts to a federal debt that must be repaid by the household. Under existing public assistance program rules, a percentage of the federal claim may be retained by the state as an incentive to identify and recover overpaid benefits.³ The percentage of federal debt collected that the state may retain is known as the state-retained share of recoveries. The percentage retained varies based on the reason that benefits were overpaid in the first place.

Further, s. 414.39, F.S., allows the DCF, subject to availability of funds, to pay a reward to a person who furnishes and reports original information relating to a violation of the state's public assistance fraud laws if:

- A report is made to DFS or the Department of Law Enforcement (FDLE),
- The information relates to criminal fraud upon public assistance program funds or a criminal violation of public assistance fraud laws by another person, or
- It leads to the recovery of a fine, penalty, or forfeiture of property.

The reward may not exceed 10 percent of the amount recovered or \$500,000, whichever is less, in a single case. The reward shall be paid from the state share of the recovery in the DCF Federal Grants Trust Fund.

Department of Financial Services

Section 414.411, F.S., assigns the responsibility to investigate all public assistance fraud to the Department of Financial Services (DFS). DFS examines records and interviews persons who may have knowledge of public assistance fraud. All public assistance recipients must allow state agencies access to their past or present employers and records. DFS may administer oaths and affirmations, and issue and serve subpoenas for the attendance of witnesses or the production of business records, books, papers, correspondences, memoranda, and other records. The Division of Public Assistance Fraud within DFS is considered a criminal justice agency. Such designation allows access to specialized training and to the state and federal criminal history databases. DFS public assistance fraud investigations can result in criminal prosecution based on a referral to a state attorney or administrative sanctions and recoveries in the commission of fraud. Currently, DFS investigates less than 10% of the referrals made by the DCF and the Office of Early Learning.

² Office of Program Policy Analysis and Government Accountability, Government Program Summaries, available at http://www.oppaga.state.fl.us/profiles/5047 (*last visited 1/17/18*).

³ Department of Financial Services Bill Analysis of HB 643. Dated 11/29/17. On file with the Senate Committee on Children, Families and Elder Affairs.

⁴ Florida Crime Information Center/National Crime Information Center

⁵ Department of Financial Services Bill Analysis of HB 643. Dated 11/29/17. On file with the Senate Committee on Children, Families and Elder Affairs.

III. Effect of Proposed Changes:

Section 1 amends s. 414.39, F.S., to clarify that the amount of the reward the DCF may pay for information regarding public assistance fraud may not exceed 10 percent of the amount recovered in full or \$500,000, whichever is less. Current law allows the DCF to pay awards up to 10 percent of the amount recovered or \$500,000, whichever is less.

Section 2 amends s. 414.41, F.S., relating to recovered funds from public assistance fraud. The bill requires that all state-retained recoveries be deposited in the Federal Grants Trust Fund and be retained each year for use by the DCF for its efforts to combat public assistance fraud. The bill allows such funds to be used to pay awards as well as pay for fraud prevention initiatives implemented by the DCF. The DCF will report to the legislature each October 1st what such initiatives accomplished in regards to the amount of awards paid and the outcome of fraud prevention activities. The bill requires such expenditures to be appropriated by the Legislature. Currently, the DCF can propose to use such funds for public assistance fraud prevention through its Legislative Budget Request.

Section 4 provides an effective date of July 1, 2018.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

None.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

The bill restricts the use of recovered funds from public assistance fraud in the DCF Federal Grants Trust Fund to activities contained in the DCF's plan for improving its efforts to combat public assistance fraud.

V. Fiscal Impact Statement:

A. Tax/Fee Issues:

None.

B. Private Sector Impact:

None.

C. Government Sector Impact:

The DCF collects between \$4 and \$7 million each year beyond the costs of its public assistance fraud recovery efforts. These funds are typically appropriated by the legislature for department priorities in the General Appropriations Act each year. The bill requires state-retained recoveries be appropriated to the DCF for activities in its plan for reducing public assistance fraud.

VI. Technical Deficiencies:

None.

VII. Related Issues:

None.

VIII. Statutes Affected:

This bill substantially amends the following sections of the Florida Statutes: 414.39 and 414.41.

IX. Additional Information:

A. Committee Substitute – Statement of Changes:
(Summarizing differences between the Committee Substitute and the prior version of the bill.)

CS by Children, Families, and Elder Affairs on January 22, 2018:

The CS removes the designation of DCF's public assistance fraud office as a criminal justice agency.

B. Amendments:

None.

This Senate Bill Analysis does not reflect the intent or official position of the bill's introducer or the Florida Senate.

⁶ Department of Children and Families Bill Analysis of SB 1232. Dated 12/12/17. On file with the Senate Committee on Children, Families and Elder Affairs.

Florida Senate - 2018 CS for SB 1232

 $\mathbf{B}\mathbf{y}$ the Committee on Children, Families, and Elder Affairs; and Senator Baxley

586-02342-18 20181232c1

A bill to be entitled

An act relating to public assistance fraud; amending s. 414.39, F.S.; revising the maximum reward paid to persons providing certain information leading to the recovery of certain fraudulent public assistance payments; revising the funding source for such rewards; amending s. 414.41, F.S.; directing stateretained shares of recovered public assistance overpayments to be held in the Federal Grants Trust Fund; requiring such funds to be reallocated to the Department of Children and Families; specifying how such funds may be used by the department; requiring the department to submit an annual report and to propose certain projects for legislative authorization; providing an effective date.

Be It Enacted by the Legislature of the State of Florida:

Section 1. Paragraphs (b) and (c) of subsection (11) of section 414.39, Florida Statutes, are amended to read:
414.39 Fraud.—

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- (b) The reward may not exceed 10 percent of the amount recovered <u>in full by the department</u> or \$500,000, whichever is less, in a single case.
- (c) The reward shall be paid from the <u>state-retained</u> state
 share of the <u>recovered overpayments held recovery</u> in the Federal
 Grants Trust Fund from moneys collected pursuant to s. 414.41.
 Section 2. Subsection (4) is added to section 414.41,

Page 1 of 3

 ${\tt CODING:}$ Words ${\tt stricken}$ are deletions; words ${\tt \underline{underlined}}$ are additions.

Florida Senate - 2018 CS for SB 1232

20181232c1

586-02342-18

30	Florida Statutes, to read:
31	414.41 Recovery of payments made due to mistake or fraud.—
32	(4) All collected state-retained shares of recovered
33	overpayments during each fiscal year shall be held in the
34	Federal Grants Trust Fund to be reallocated to the department
35	the following fiscal year for use as specified in this
36	subsection.
37	(a) Funds held in the Federal Grants Trust Fund pursuant to
38	this subsection may be used by the department to:
39	1. Pay public assistance fraud rewards as provided in s.
40	$\underline{414.39(11)}$ and to fund public assistance fraud detection; and
41	2. Fund prevention initiatives that enable the department
42	to respond to emergent public assistance fraud schemes and
43	threats pursuant to authorization under paragraph (c).
44	(b) By October 1 of each year, the department shall submit
45	a report to the Legislature which includes the following:
46	1. The actual outcomes and returns on investment associated
47	with projects approved pursuant to paragraph (c) during the
48	<pre>previous fiscal year.</pre>
49	2. The amount of funds in the Federal Grants Trust Fund
50	available for expenditure pursuant to this subsection.
51	3. The number and amount of public assistance fraud rewards
52	paid during the previous fiscal year and anticipated to be paid
53	during the next fiscal year.
54	4. Descriptions of specific proposed projects to be
55	supported by the expenditure of funds held according to this
56	subsection, including expected outcomes of the proposed
57	projects, and the estimated return on investment for the
58	following fiscal year.

Page 2 of 3

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Florida Senate - 2018 CS for SB 1232

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(c) Contingent upon specific authorization in the General Appropriations Act or similar legislation, and notwithstanding Chapter 216, the department may use funds, pursuant to this subsection, to pay public assistance fraud rewards and to fund one or more of the specific projects proposed in the annual report required under paragraph (b).

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60 61

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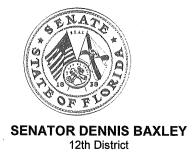
64

Section 3. This act shall take effect July 1, 2018.

Page 3 of 3

CODING: Words stricken are deletions; words underlined are additions.

THE FLORIDA SENATE



COMMITTEES:

Governmental Oversight and Accountability, Chair Criminal Justice, Vice Chair Appropriations
Appropriations Subcommittee on Criminal and Civil Justice
Appropriations Subcommittee on Health and Human Services
Agriculture
Transportation

SELECT COMMITTEE:

Joint Select Committee on Collective Bargaining

JOINT COMMITTEE:

Joint Legislative Auditing Committee

January 23, 2018

The Honorable Senator Anitere Flores 404 Senate Office Building 404 South Monroe Street Tallahassee, Florida 32399

Dear Senator Flores,

I respectfully request that you place CS/SB 1232 Public Assistance Fraud on your next available agenda.

This will revise the maximum amount of reward paid to persons providing certain information leading to the recovery of certain fraudulent public assistance payments. The reward may not exceed 10 percent of the amount recovered in full by the department or \$500,000, whichever is less, in a single case.

The reward shall be paid from the state-retained share of the recovered overpayments held in the Federal Grants Trust Fund from moneys collected. All collected state-retained shares of recovered overpayments during each fiscal year shall be held in the Federal Grants Trust Fund to be reallocated to the department the following fiscal year. Funds held in the Federal Grants Trust Fund may be used by the department to: pay public assistance fraud rewards, to fund public assistance fraud detection, and fund prevention initiatives.

I appreciate your favorable consideration.

Onward & Upward,

Senator Dennis Baxley

Senate District 12

DKB/dd

cc: Phil Williams, Staff Director

320 Senate Office Building, 404 South Monroe St, Tallahassee, Florida 32399-1100 ● (850) 487-5012 Email: baxley.dennis@flsenate.gov

JOE NEGRON
President of the Senate

ANITERE FLORES
President Pro Tempore

S-001 (10/14/14)

THE FLORIDA SENATE

APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

Topic	02/28/18				1232
Name Lindsey Zander Job Title Deputy Legislative Affairs Director - DCF Address 1317 Winewood Blvd Phone (850) 488-9410 Street Tallahassee FL 32399 Email City State Zip Speaking: For Against Information Waive Speaking: In Support Against (The Chair will read this information into the record.) Representing Department of Children and Families Appearing at request of Chair: Yes No Lobbyist registered with Legislature: Yes No While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this	Meeting Date				Bill Number (if applicabl
Job Title Deputy Legislative Affairs Director - DCF Address 1317 Winewood Blvd Phone (850) 488-9410 Street Tallahassee FL 32399 Email City State Zip Speaking: For Against Information Waive Speaking: In Support Against (The Chair will read this information into the record.) Representing Department of Children and Families Appearing at request of Chair: Yes No Lobbyist registered with Legislature: Yes No While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this	Topic				Amendment Barcode (if applicat
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Street Tallahassee FL State Zip Speaking: For Against Information Waive Speaking: In Support Against (The Chair will read this information into the record.) Representing Department of Children and Families Appearing at request of Chair: Yes No Lobbyist registered with Legislature: Yes No While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this	Job Title Deputy Legislative Affairs	Director - DCF			
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Appearing at request of Chair: Yes No Lobbyist registered with Legislature: Yes No While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this			Waive S		
While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this	Representing Department of C	hildren and Families			
	Appearing at request of Chair:	Yes No	Lobbyist regist	ered with L	egislature: Ves N

This form is part of the public record for this meeting.

The Florida Senate BILL ANALYSIS AND FISCAL IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

Prepare	d By: The Profe	essional Staff of the Approp	oriations Subcommi	ittee on Health and Human Services						
BILL:	CS/SB 150									
INTRODUCER:	Banking and Insurance Committee and Senator Lee									
SUBJECT:	Motor Veh	icle Insurance								
DATE:	February 2	7, 2018 REVISED:								
ANAL	YST	STAFF DIRECTOR	REFERENCE	ACTION						
. Knudson		Knudson	BI	Fav/CS						
2. Kidd		Williams	AHS	Pre-meeting						
		<u> </u>	AP							

Please see Section IX. for Additional Information:

COMMITTEE SUBSTITUTE - Substantial Changes

I. Summary:

CS/SB 150 repeals the Florida Motor Vehicle No-Fault Law (No-Fault Law), which requires every owner and registrant of a motor vehicle in this state to maintain \$10,000 Personal Injury Protection (PIP) coverage. The bill enacts financial responsibility requirements for damages for liability that results from accidents arising out of the ownership, maintenance, or use of a motor vehicle in the amount of:

- Beginning January 1, 2019, through December 31, 2020, \$20,000 for bodily injury (BI) or death of one person in any one crash, and subject to that limit for one person, \$40,000 for bodily injury or death of two or more people in any one crash.
- Beginning January 1, 2021, through December 31, 2022, \$25,000 for bodily injury or death of one person in any one crash, and subject to that limit for one person, \$50,000 for bodily injury or death of two or more people in any one crash.
- Beginning January 1, 2023, and thereafter \$30,000 for bodily injury or death of one person in any one crash, and subject to that limit for one person, \$60,000 for bodily injury or death of two or more people in any one crash.

The bill retains the \$10,000 financial responsibility requirement for property damage.

The bill replaces the PIP coverage mandate with a medical payments (Med Pay) coverage mandate of \$5,000. Medical payments coverage under the bill provides reimbursement for 100 percent of covered medical losses, whereas PIP reimburses only 80 percent of covered medical losses. Medical payments coverage will provide reimbursement for all of the following

medically necessary treatments if the injured individual initially receives treatment within 14 days after the motor vehicle accident:

- Emergency transport and treatment provided by a provider licensed under ch. 401, F.S.
- Emergency services and care provided by a hospital licensed under ch. 395, F.S.
- Emergency services and care and related hospital inpatient services rendered by a physician or dentist that are provided in a facility licensed under ch. 395, F.S.
- Hospital inpatient services other than emergency services and care.
- Hospital outpatient services other than emergency services and care.
- Physician services and care provided by a physician licensed under ch. 458, F.S., or ch. 459, F.S., or a chiropractic physician licensed under ch. 460, F.S., or dental services and care provided by a dentist licensed under ch. 466, F.S.

The repeal of the No-Fault Law eliminates the limitations on recovering pain and suffering damages from PIP insureds, which currently require bodily injury that causes death or significant and permanent injury.

The repeal of the No-Fault Law, the financial responsibility requirements for bodily injury, and the requirement to maintain medical payments coverage take effect January 1, 2019.

The Office of Insurance Regulation has indicated it will need \$63,651 from the Insurance Regulatory Trust Fund for an additional actuarial analyst position and \$20,000 from the Insurance Regulatory Trust Fund for contracted services to update the Rate Collection System.

The bill takes effect January 2, 2019, except that section 51 takes effect upon becoming a law.

II. Present Situation:

Under the Florida Motor Vehicle No-Fault Law (No-Fault Law),¹ owners or registrants of motor vehicles are required to purchase personal injury protection (PIP) insurance which compensates persons injured in accidents regardless of fault.² Policyholders are indemnified by their own insurer. The intent of no-fault insurance is to provide prompt medical treatment without regard to fault.³ This coverage also provides policyholders with immunity from liability for economic damages up to the policy limits and limits tort suits for non-economic damages (pain and suffering) below a specified injury threshold.⁴ In contrast, under a tort liability system, the negligent party is responsible for damages caused and an accident victim can sue the at-fault driver to recover economic and non-economic damages.

Florida drivers are required to purchase both PIP and property damage liability (PD) insurance.⁵ The personal injury protection must provide a minimum benefit of \$10,000 for bodily injury to any one person who sustains an emergency medical condition, which is reduced to a \$2,500 limit for medical benefits if a treating medical provider determines an emergency medical condition

¹ Sections 627.730-627.7405, F.S.

² Section 627.733, F.S.

³ See s. 627.731, F.S.

⁴ Section 627.737, F.S.

⁵ See ss. 324.022, F.S. and 627.733, F.S.

did not exist.⁶ PIP coverage provides reimbursement for 80 percent of reasonable medical expenses,⁷ 60 percent of loss of income,⁸ and 100 percent of replacement services,⁹ for bodily injury sustained in a motor vehicle accident, without regard to fault. The property damage liability coverage must provide a \$10,000 minimum benefit. A \$5,000 death benefit is also provided.¹⁰

PIP Medical Benefits

The 2012 Legislature revised the provision of PIP medical benefits under the No-Fault Law, effective January 1, 2013. To receive PIP medical benefits, insureds must receive initial services and care within 14 days after the motor vehicle accident. Initial services and care are only reimbursable if lawfully provided, supervised, ordered or prescribed by a licensed physician, licensed osteopathic physician, licensed chiropractic physician, licensed dentist, or must be rendered in a hospital, a facility that owns or is owned by a hospital, or a licensed emergency transportation and treatment provider. Follow-up services and care require a referral from such providers and must be consistent with the underlying medical diagnosis rendered when the individual received initial services and care.

PIP medical benefits have two different coverage limits, based upon the severity of the medical condition of the individual. An insured may receive up to \$10,000 in medical benefits for services and care if a physician, osteopathic physician, dentist, physician's assistant or advanced registered nurse practitioner has determined that the injured person had an emergency medical condition. An emergency medical condition is defined as a medical condition manifesting itself by acute symptoms of sufficient severity that the absence of immediate medical attention could reasonably be expected to result in serious jeopardy to patient health, serious impairment to bodily functions, or serious dysfunction of a body organ or part. If a provider who rendered treatment or services determines that the insured did not have an emergency medical condition, the PIP medical benefit limit is \$2,500. Massage and acupuncture are not reimbursable, regardless of the type of provider rendering such services.

The \$5,000 PIP death benefit is provided in addition to medical and disability benefits, effective January 1, 2013. Previously, the death benefit was the lesser of the unused PIP benefits, up to a limit of \$5,000.

⁶ Section 627.736(1), F.S.

⁷ Section 627.736(1)(a), F.S.

⁸ Section 627.736(1)(b), F.S.

⁹ Id.

¹⁰ Section 627.736(1)(c), F.S.

¹¹ Chapter 2012-197, L.O.F. (CS/CS/HB 119)

¹² Section 627.736(1)(a), F.S.

¹³ Section 627.736(1)(a)1., F.S.

¹⁴ Section 627.736(1)(a)2., F.S.

¹⁵ Section 627.736(1)(a)3., F.S.

¹⁶ Section 627.732(16), F.S.

¹⁷ Section 627.736(1)(a)4., F.S.

¹⁸ Section 627.736(1)(a)5., F.S.

Medical Fee Limits for PIP Reimbursement

Section 627.736(5), F.S., authorizes insurers to limit reimbursement for benefits payable from PIP coverage to 80 percent of the following schedule of maximum charges:

- For emergency transport and treatment (ambulance and emergency medical technicians), 200 percent of Medicare;
- For emergency services and care provided by a hospital, 75 percent of the hospital's usual and customary charges;
- For emergency services and care and related hospital inpatient services rendered by a physician or dentist, the usual and customary charges in the community;
- For hospital inpatient services, 200 percent of Medicare Part A;
- For hospital outpatient services, 200 percent of Medicare Part A;
- For services supplies and care provided by ambulatory surgical centers and clinical laboratories, 200 percent of Medicare Part B;
- For durable medical equipment, 200 percent of the Durable Medical Equipment Prosthetics/Orthotics and Supplies fee schedule of Medicare Part B;
- For all other medical services, supplies, and care, 200 percent of the participating physicians fee schedule of Medicare Part B; and
- For medical care not reimbursable under Medicare, 80 percent of the workers' compensation fee schedule. If the medical care is not reimbursable under either Medicare or workers' compensation then the insurer is not required to provide reimbursement.

The insurer may not apply any utilization limits that apply under Medicare or workers' compensation. ¹⁹ In addition, the insurer must reimburse a health care provider rendering services under the scope of his or her license, regardless of any restriction under Medicare that restricts payments to certain types of health care providers for specified procedures. Medical providers are not allowed to bill the insured for any excess amount when an insurer limits payment as authorized in the fee schedule, except for amounts that are not covered due to the PIP coinsurance amount (the 20 percent copayment) or for amounts that exceed maximum policy limits. ²⁰

In 2012, the Legislature enacted chapter 2012-197, Laws of Florida, to revise the PIP medical fee schedule in an effort to resolve alleged ambiguities that led to conflicts and litigation between claimants and insurers. The law clarified the reimbursement levels for care provided by ambulatory surgical centers and clinical laboratories and for durable medical equipment. The law also provided that Medicare fee schedule in effect on March 1 is applicable for the remainder of that year. Insurers were authorized to use Medicare coding policies and payment methodologies of the Centers for Medicare and Medicare Services, including applicable modifiers, when applying the fee schedule if they do not constitute a utilization limit. The law also required insurers to include notice of the fee schedule in their policies.

¹⁹ Section 627.736(5)(a)3., F.S.

²⁰ Section 627.736(5)(a)4., F.S.

²¹ Section 627.736(5)(a)2., F.S.

²² Section 627.736(5)(a)3., F.S.

²³ Section 627.736(5)(a)5., F.S.

Attorney Fees

Section 627.428, F.S., requires an insurer to pay the insured's or beneficiary's reasonable attorney fees upon a judgment against the insurer and in favor of the insured or named beneficiary under an insurance policy, and applies to disputes under the No-Fault Law.²⁴ Chapter 2012-197, L.O.F., amended provisions related to attorney fee awards in No-Fault disputes. The law prohibited the application of attorney fee multipliers.²⁵ The law also required that the attorney fees awarded must comply with prevailing professional standards, not overstate or inflate the number of hours reasonably necessary for a case of comparable skill or complexity, and represent legal services that are reasonable to achieve the result obtained.²⁶ The offer of judgment statute, s. 768.79, F.S., is applied to No-Fault cases, providing statutory authority for insurers to recover fees if the plaintiff's recovery does not exceed the insurer's settlement offer by a statutorily specified percentage.²⁷

Mandatory Rate Filings and Data Call

Chapter 2012-197, L.O.F., required the Office of Insurance Regulation to contract with a consulting firm to calculate the expected savings from the act. ²⁸ The OIR retained Pinnacle Actuarial Resources, Inc., which released an August 20, 2012, report estimating an indicated statewide average savings in PIP premiums of 14 percent to 24.6 percent and an average overall motor vehicle insurance premium reduction ranging from 2.8 percent to 4.9 percent. ²⁹ The report noted that if insurers' current PIP rates were inadequate they would likely offset the savings from Chapter 2012-197, L.O.F., against their indicated PIP rates. By October 1, 2012, each insurer writing private passenger automobile PIP insurance was required to submit a rate filing providing at least a 10 percent reduction of its PIP rate or explain in detail its reasons for failing to achieve those savings. The Legislature required a second mandatory rate filing due January 1, 2014, that provided at least a 25 percent reduction of the insurer's July 1, 2012, PIP rate or explained in detail its reasons for failing to achieve those savings.

The Office of Insurance Regulation performed a comprehensive PIP data call on January 1, 2015, that analyzed the impact of the 2012 act's reforms on the PIP insurance market. The top 25 personal lines automobile insurers³⁰ generally failed to achieve a 25 percent rate reduction and instead reduced PIP rates an average of 13.6 percent.³¹ Rates were only reduced an average of 0.1 percent for a full auto insurance premium consisting of PIP, property damage, bodily injury, uninsured motorists, collision and comprehensive coverages.³² The OIR noted that though the required rate filings were on the low end of 2012 Pinnacle report, prior to the 2012 act, the

²⁴ Section 627.736(8), F.S.

²⁵ See id.

²⁶ See id.

²⁷ See id.

²⁸ Section 15, Ch. 2012-197, L.O.F.

²⁹ Pinnacle Actuarial Resources, Inc., *Impact Analysis of HB 119*, (Aug. 20, 2012).

³⁰ On an earned premium basis.

³¹ Office of Insurance Regulation, Report on Review of the Data Call Pursuant to HB 119 – Motor Vehicle Personal Injury Protection (PIP) Insurance, Pg. 43 (January 1, 2015).

³² See id.

statewide average approved rate changes were a 46.3 percent increase in PIP rates, and a 12.9 percent rate increase for full auto insurance.³³

Rate filings by top 25 auto insurers from January 1, 2015, to January 18, 2017, reversed the entirety of the rate reductions achieved post the 2012 act, resulting in average premiums higher than those charged before that act became law.³⁴ Generally, motor vehicle insurance rates increased nationally. The United States Department of Labor calculates that the consumer price index for motor vehicle insurance (U.S. city average for urban consumers) increased 8.2 percent³⁵ from October 2016, to October 2017, with followed a 6.7 percent³⁶ increase from October 2015 to October 2016. The number of crashes and crashes involving injuries reported to the Florida Department of Highway Safety and Motor Vehicles has increased in recent years. The number of crashes (346,326) and injury crashes (143,981) from January 1, 2017, through November 28, 2017, exceeds the number of crashes for the entire year of 2013 (317,355 crashes with 140,241 being injury crashes).³⁷

Motor Vehicle Insurance Fraud

Motor vehicle insurance fraud is a long-standing problem in Florida. In November 2005, the Senate Banking and Insurance Committee issued a report entitled "Florida's Motor Vehicle No-Fault Law", which was a comprehensive review of Florida's No-Fault system. The report noted that fraud was at an "all-time" high at the time, noting that there were 3,942 PIP fraud referrals received by the Division of Insurance Fraud during the 3 fiscal years beginning in 2002 and ending in 2005. That 3-year amount was nearly doubled by the 7,240 PIP fraud referrals received by the division during the 2014-2015 fiscal year. ³⁸ Given this fact, the following description from the 2005 report is an accurate description of the current situation regarding motor vehicle insurance fraud:

"Florida's no-fault laws are being exploited by sophisticated criminal organizations in schemes that involve health care clinic fraud, staging (faking) car crashes, manufacturing false crash reports, adding occupants to existing crash reports, filing PIP claims using contrived injuries, colluding with dishonest medical treatment providers to fraudulently bill insurance companies for medically unnecessary or non-existent treatments, and patient-brokering..."

Fraudulent claims are a major cost-driver and result in higher motor vehicle insurance premium costs for Florida policyholders. The 2012 act contained numerous provisions designed to curtail PIP fraud. A health care practitioner found guilty of insurance fraud under s. 817.234, F.S., loses

³⁴ See Office of Insurance Regulation, *Florida Personal Auto Market Presented to The Florida Senate Committee on Banking and Insurance*, pg. 3 (January 24, 2017).

³³ See id. on pg. 41.

³⁵ United States Department of Labor, *Economic News Release Consumer Price Index Summary: Table 2* (November 15, 2017) https://www.bls.gov/news.release/cpi.t02.htm (last accessed November 29, 2017).

³⁶ United States Department of Labor, *Economic News Release Consumer Price Index Summary: Table 2* (November 17, 2016) https://www.bls.gov/news.release/archives/cpi 11172016.htm (last accessed November 29, 2017).

³⁷ See Florida Department of Highway Safety and Motor Vehicles, Florida Integrated Report Exchange System Quick Statistics at https://firesportal.com/Pages/Public/QuickStats.aspx (last accessed on November 29, 2017).

³⁸ Florida Department of Financial Services, *Division of Insurance Fraud Annual Report Fiscal Year 2014 – 2015*, pg. 28 http://www.myfloridacfo.com/Division/DIFS/resources/documents/2014-15_Annual-Report.pdf (last accessed on December 4, 2017).

his or her license for 5 years and may not receive PIP reimbursement for 10 years. Insurers are provided an additional 60 days (90 total) to investigate suspected fraudulent claims, however, an insurer that ultimately pays the claim must also pay an interest penalty.³⁹ All entities seeking reimbursement under the No-Fault Law must obtain health care clinic licensure except for hospitals, ambulatory surgical centers, entities owned or wholly owned by a hospital, clinical facilities affiliated with an accredited medical school and practices wholly owned by a physician, dentist, or chiropractic physician or by such physicians and specified family members.⁴⁰ The act also defined failure to pay PIP claims within the time limits of s. 627.736(4)(b), F.S., as an unfair and deceptive practice.

Financial Responsibility Law

Florida's financial responsibility law requires proof of ability to pay monetary damages for bodily injury and property damage liability arising out of a motor vehicle accident or serious traffic violation. The owner and operator of a motor vehicle need not demonstrate financial responsibility, i.e., obtain BI and PD coverages, until *after the accident*. At that time, a driver's financial responsibility is proved by the furnishing of an active motor vehicle liability policy. The minimum amounts of liability coverages required are \$10,000 in the event of bodily injury to, or death of, one person, \$20,000 in the event of injury to, or death of, two or more persons, and \$10,000 in the event of damage to property of others, or \$30,000 combined BI/PD policy. The driver's license and registration of the driver who fails to comply with the security requirement to maintain PIP and PD insurance coverage is subject to suspension. A driver's license and registration may be reinstated by obtaining a liability policy and by paying a fee to the Department of Highway Safety and Motor Vehicles.

Review of Auto Insurance Systems

Two auto insurance systems are utilized throughout the country: the tort system and the no-fault system, with certain variations. Thirty-eight states utilize the tort system in which the at-fault party is liable for damages (medical, economic, property damage and pain and suffering) to other parties in an accident. ⁴⁶ Parties seeking redress for their injuries do so from the at-fault driver, and must prove negligence on the part of that individual. Nine of the 38 tort states, known as "add-on" states, require auto insurers to offer PIP coverage, but unlike no-fault states, do not restrict the right to pursue a liability claim or lawsuit. ⁴⁷ Benefits are generally either offered in a PIP coverage form similar to that in no-fault states or as additional wage replacement benefits to

³⁹ Section 627.736(4)(i), F.S.

⁴⁰ Section 627.736(5)(h), F.S.

⁴¹ See ch. 324, F.S.

⁴² Section 324.011, F.S.

⁴³ Section 324.022, F.S.

⁴⁴ Section 324.0221(2), F.S.

⁴⁵ Section 324.0221(3), F.S.

⁴⁶ Alabama, Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, Georgia, Idaho, Illinois, Indiana, Iowa, Louisiana, Maine, Maryland, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Mexico, North Carolina, Ohio, Oklahoma, Oregon, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Vermont, Virginia, Washington, West Virginia, Wisconsin, and Wyoming.

⁴⁷ Arkansas, Delaware, Maryland, Oregon, South Dakota, Texas, Virginia, Washington, and Wisconsin.

medical payments coverage. Three tort add-on states require the purchase of PIP coverage; six do not, but require insurers to offer PIP coverage.

Twelve states (including Florida) have a no-fault system and mandate first-party PIP coverage for medical benefits, wage loss, and death benefits, with a limitation on pain and suffering lawsuits. All 12 jurisdictions take different approaches to no-fault legislation in that coverage amounts, deductibles, mandated coverages, tort thresholds for pain and suffering claims, and the use of fee schedules or treatment protocols vary widely among these entities. Each state has either a "verbal" or "monetary" threshold regarding the seriousness of a person's injuries that must be met prior to the filing of a tort suit for noneconomic damages against an at-fault driver. Florida and the four most populous no-fault states use a verbal threshold, which is a statutory description of the severity of an injury. The seven remaining no-fault states have monetary thresholds ranging from \$1,000 to \$5,000. Three of the 12 no-fault states (Kentucky, New Jersey and Pennsylvania) are known as "choice" states and offer consumers a choice between purchasing PIP coverage and traditional tort liability coverage, which does not include PIP benefits.

Auto Coverage Requirements

Forty-eight states require car owners to buy a minimum amount of bodily injury liability (BI) and property damage liability (PD) insurance coverage before they can legally drive their vehicles. ⁴⁹ Further, all states have financial responsibility laws which require persons involved in auto accidents (or serious traffic infractions) to furnish proof of BI and PD liability insurance. The minimum coverage amounts vary among the states. Florida has a requirement for bodily liability coverage for persons subject to the Financial Responsibility Law of \$10,000 per person, \$20,000 per accident, and \$10,000 in the event of damage to property of others, or a \$30,000 combined (BI/PD) single limit. A Florida driver is not required to maintain BI coverage until he or she is involved in a crash or convicted of certain traffic offenses. The following chart shows the required motor vehicle insurance coverages in each state and the minimum coverages for bodily injury liability coverage and property damage coverage.

⁴⁸ Hawaii, Kansas, Kentucky, Massachusetts, Michigan, Minnesota, New Jersey, New York, North Dakota, Pennsylvania, and Utah are the other No-Fault states.

⁴⁹ New Hampshire does not require auto insurance if the driver complies with alternative financial responsibility requirements. Florida only requires BI coverage after a driver is involved in a crash.

State Motor Vehicle Insurance Requirements

ST	Ins. Req.	Min. BI/PD	ST	Ins. Req.	Min. BI/PD	ST	Ins. Req.	Min. BI/PD
AL	BI/PD	25/50/25	LA	BI/PD	15/30/25	ОН	BI/PD	25/50/25
AK	BI/PD	50/100/25	ME	BI/PD/UM	50/100/25	OK	BI/PD	25/50/25
AZ	BI/PD	15/30/10	MD	BI/PD/PIP/UM	30/60/15	OR	BI/PD/PIP/UM	25/50/25
AR	BI/PD/PIP	25/50/25	MA	BI/PD/PIP/UM	20/40/5	PA	BI/PD/PIP	15/30/5
CA	BI/PD	15/30/5	MI	BI/PD/PIP	20/40/10	RI	BI/PD	25/50/25
CO	BI/PD	25/50/15	MN	BI/PD/PIP/UM	30/60/10	SC	BI/PD/UM	25/50/25
СТ	BI/PD/UM	20/40/10	MS	BI/PD	25/50/25	SD	BI/PD/UM	25/50/25
DE	BI/PD/PIP	15/30/10	МО	BI/PD/UM	25/50/10	TN	BI/PD	25/50/15
FL	PIP/PD	10/20/10	MT	BI/PD	25/50/20	TX	BI/PD	30/60/25
GA	BI/PD	25/50/25	NE	BI/PD/UM	25/50/25	UT	BI/PD/PIP	25/65/15
HI	BI/PD/PIP	20/40/10	NV	BI/PD	15/30/10	VT	BI/PD/UM	25/50/10
ID	BI/PD	25/50/15	NH	None	25/50/25	VA	BI/PD/UM	25/50/20
IL	BI/PD/UM	25/50/20	NJ	BI/PD/PIP/UM	15/30/5	WA	BI/PD	25/50/10
IN	BI/PD	25/50/25	NM	BI/PD	25/50/10	WV	BI/PD/UM	25/50/25
IA	BI/PD	20/40/15	NY	BI/PD/PIP/UM	35/50/10	WI	BI/PD/UM	25/50/10
KS	BI/PD/PIP	25/50/25	NC	BI/PD/UM	30/60/25	WY	BI/PD	25/50/20
KY	BI/PD/PIP	25/50/10	ND	BI/PD/PIP/UM	25/50/25	DC	BI/PD/PIP/UM	25/50/10

Tort-Based Motor Vehicle Insurance Jurisdictions

In a tort-based liability system, auto injury claimants seek payment from the at-fault driver for both economic and non-economic damages from dollar one. A tort-based system represents a more traditional legal philosophy of holding persons responsible for injuries caused by their negligent operation of a vehicle. In theory, this encourages safer operation of automobiles and is generally viewed by the public as consistent with the concept of personal responsibility.

If Florida repeals PIP and mandates BI coverage, it will be important for drivers to appreciate coverage applications under the tort system. For the most common type of accident (with one party at-fault), the at-fault party's BI coverage would pay for injuries to the not at-fault driver, unless the at-fault party was uninsured. If the at-fault party is uninsured (or underinsured), the not at-fault party would utilize his/her Uninsured Motorist (UM) coverage, if purchased, to pay for injuries sustained in an accident. The at-fault party's PD coverage would compensate for physical damages to the not at-fault driver's vehicle. If the not-at-fault party has Med Pay coverage, it can be used to cover his or her own medical expenses, which could then be subrogated into the BI claim by the not at-fault driver's insurer.

With respect to the at-fault party, that driver's own health insurance, if available, would cover his or her own expenses. Med Pay coverage, if purchased, would pay for his/her medical expenses up to the Med Pay limits, at which point health insurance would apply. In the event the at-fault party did not have health insurance, then the medical costs would not be reimbursed and the

individual would be responsible for these costs or such costs would be assumed by the health care provider.

For single car accidents, the driver of the vehicle is presumed to be the at-fault party and therefore will be essentially in the same situation as the at-fault party described above. Occupants in the vehicle can sue the driver of the vehicle for their injuries and are in a similar circumstance to the not at-fault party's situation, previously described. Family members are precluded from suing the driver because of the intra-family exclusion resulting in the fact that only non-family occupants can pursue a tort claim. Pedestrians who are injured in an accident are in a similar situation as the not at-fault party.

III. Effect of Proposed Changes:

Repeal of the Florida Motor Vehicle No-Fault Law

Section 1 repeals ss. 627.730-627.7405, F.S., which constitute the Florida Motor Vehicle No-Fault Law.

Many of the provisions of the No-Fault Law are retained in s. 627.7265, F.S., (section 39 of the bill) as detailed below. Two of the most significant provisions not retained are the tort exemption in s. 627.737, F.S., which prohibits tort actions to recover pain and suffering damages from PIP insureds unless death or significant and permanent injury causes such damages, and coverage for disability and death benefits under PIP.

Section 2 repeals s. 627.7407, F.S., which explained how the Florida Motor Vehicle No-Fault Law was to be applied after being reinstated by ch. 2007-324, Laws of Florida.

Mandatory Bodily Injury Liability Coverage Requirements

Chapter 324, F.S., requires the owners and operators of motor vehicles to demonstrate the ability to respond to damages for liability because of crashes arising out of the use of a motor vehicle.⁵⁰ This requirement is usually met through the purchase of motor vehicle insurance.

Sections 12 and 13 amend ss. 324.021 and 324.022, F.S., respectively, to require every owner or operator of a motor vehicle registered in this state to maintain the ability to respond to damages for liability that results from accidents arising out of the ownership, maintenance, or use of a motor vehicle in the amount of:

- Beginning January 1, 2019, through December 31, 2020, \$20,000 for bodily injury or death of one person in any one crash, and subject to that limit for one person, \$40,000 for bodily injury or death of two or more people in any one crash.
- Beginning January 1, 2021, through December 31, 2022, \$25,000 for bodily injury or death of one person in any one crash, and subject to that limit for one person, \$50,000 for bodily injury or death of two or more people in any one crash.

⁵⁰ Owners and operators of motor vehicles may satisfy financial responsibility requirements by alternate means, such as depositing security with the Department of Highway Safety and Motor Vehicles pursuant to s. 324.161, F.S., or qualifying as a self-insurer pursuant to s. 324.171, F.S.

• Beginning January 1, 2023, and thereafter, \$30,000 for bodily injury or death of one person in any one crash, and subject to that limit for one person, \$60,000 for bodily injury or death of two or more people in any one crash.

The bill retains current law that requires drivers to maintain the ability to respond to damages of \$10,000 for damage to, or the destruction of, other's property in a crash.

Financial responsibility may be met through motor vehicle insurance that provides BI and PD coverage in at least the minimum amounts required to meet responsibility or through insurance that provides BI and PD with a combined single coverage limit that equals the BI requirement for more than one person plus the PD requirement. From January 1, 2019, through December 31, 2020, minimum combined single limit will be \$50,000 and will subsequently increase to \$60,000 on January 1, 2021, and \$70,000 on January 1, 2023.

Required Provisions in Motor Vehicle Liability Policies

Section 21 amends s. 324.151, F.S., which requires motor vehicle liability insurance policies that serve as proof of financial responsibility to contain certain provisions. The bill requires policies issued to the owner of a motor vehicle registered in this state to insure all named insureds and any operator using the vehicle with the permission of the owner of the vehicle insured by the policy from liability resulting from the use of the motor vehicle referenced in the policy.

Meeting Financial Responsibility through a Certificate of Self-Insurance

Section 16 amends s. 324.031, F.S., which allows owners and operators of motor vehicles that are not for-hire vehicles to prove financial responsibility by providing evidence of holding a motor vehicle liability policy. Two alternatives are also available under the statute. A person may prove financial responsibility by furnishing a certificate of self-insurance that shows a deposit of cash with a financial institution, or furnishing a certificate of self-insurance issued by the DHSMV based on demonstrating sufficient net unencumbered worth.

A certificate of self-insurance showing a deposit of cash must, beginning January 1, 2019, require a certificate of deposit equal to the number of vehicles owned times \$50,000, to a maximum of \$200,000. As of January 1, 2021, the deposit must equal the number of vehicles owned times \$60,000, to a maximum of \$240,000. On January 1, 2023, and thereafter, the deposit must equal the number of vehicles owned times \$70,000, to a maximum of \$280,000. Current law requires a deposit equal to the number of vehicles times \$30,000, to a maximum of \$120,000. The bill also requires all persons using this method to maintain excess coverage of the amount deposited. Current law does not require this of natural persons, and requires the excess coverage of a \$10,000/\$20,000/\$10,000 BI/PD or a \$30,000 combined single limit. The bill retains current law that the excess coverage must have limits of at least \$125,000/\$250,000/\$50,000 BI/PD or a \$300,000 BI/PD combined single limit.

Under Section 22 of the bill, the proof of a certificate of deposit must be provided annually, and must be from a financial institution insured by the Federal Deposit Insurance Corporation or the National Credit Union Administration.

The second alternative method is obtaining a certificate of self-insurance issued by the DHSMV.

Section 23 amends s. 324.171, F.S., to provide that a certificate of self-insurance from the DHSMV pursuant to this section may be obtained by a private individual with private passenger vehicles by demonstrating sufficient net unencumbered worth of at least \$80,000 beginning January 1, 2019; at least \$100,000 beginning January 1, 2021; and at least \$120,000 beginning January 1, 2023, and thereafter. Current law requires a net unencumbered worth of at least \$40,000. A person other than a natural person may obtain a certificate of self-insurance from the DHSMV by possessing a net unencumbered worth of at least \$80,000 for the first motor vehicle and \$40,000 for each additional vehicle beginning on January 1, 2019; a net unencumbered worth of at least \$100,000 for the first motor vehicle and \$50,000 for each additional motor vehicle beginning January 1, 2021; and a net unencumbered worth of at least \$120,000 for the first motor vehicle and \$60,000 for each additional motor vehicle beginning January 1, 2023. The bill retains current law that authorizes the DHSMV to promulgate by rule an alternative net worth requirement for persons other than natural persons. Current law requires a net unencumbered worth of \$40,000 for the first motor vehicle and \$20,000 for each additional motor vehicle.

Garage Liability Insurance Requirement

Section 7 amends s. 320.27, F.S., which requires the licensure of motor vehicle dealers. The bill increases the garage liability insurance requirement, requiring a combined single limit policy that provides BI liability and PD liability coverage with a limit of:

- At least \$50,000 beginning January 1, 2019, and continuing through December 31, 2020.
- At least \$60,000 beginning January 1, 2021, and continuing through December 31, 2022.
- At least a \$70,000 beginning January 1, 2023, and thereafter.

Current law only requires at least \$25,000 in such coverage and requires PIP. The section also corrects a cross reference in the exemption from this requirement for salvage motor dealers.

Section 8 amends s. 320.771, F.S., and applies the same garage liability insurance requirement to recreational vehicle dealers.

Financial Responsibility Requirement for For-Hire Vehicles

Section 17 amends s. 324.032, F.S., which provides the financial responsibility requirements for for-hire passenger vehicles. The bill retains current law requiring the owner or lessee to meet the financial responsibility requirement and retains the minimum limits of coverage, which are \$125,000/\$250,000 of BI and \$50,000 of PD. The bill amends current law by specifying the coverage must be purchased by an insurer that is a member of the Florida Insurance Guaranty Association.

Section 41 amends s. 627.7275, F.S., to require all motor vehicle insurance policies delivered or issued in Florida for a motor vehicle registered or principally garaged in this state to include BI liability coverage and PD liability coverage as required by s. 324.022, F.S., and Med Pay coverage as required by s. 627.7265, F.S.

Mandatory Medical Payments Coverage⁵¹

Medical Payments Coverage Benefits

Section 39 creates s. 627.7265, F.S., which requires the inclusion of medical payments coverage of at least \$5,000 in each motor vehicle liability insurance policy used to meet the financial responsibility requirements of s. 324.031, F.S.

Medical payments coverage protects the named insured, resident relatives, all passengers and operators of the insured vehicle, and all persons struck by the motor vehicle while not occupying a self-propelled motor vehicle. Medical payments coverage must provide reimbursement of medically necessary medical, surgical, X-ray, dental, and rehabilitative services, including prosthetic devices, and ambulance, hospital, and nursing services. The coverage also includes a death benefit of at least \$5,000.

Med Pay provides reimbursement of 100 percent of covered medical care and services, which differs from PIP, which provides reimbursement for 80 percent of such services and care. Deductibles are prohibited. Massage and acupuncture are not reimbursable under Med Pay coverage, nor is treatment provided by a licensed massage therapist or licensed acupuncturist. Med Pay benefits are generally primary except that workers' compensation benefits are primary and Med Pay must reimburse the state Medicaid program for any benefits it pays.

The bill retains within Med Pay the PIP requirement that an individual seeking reimbursement must receive initial services and care within 14 days of the motor vehicle accident from specified medical providers.⁵² The following medically necessary treatment, services and care are reimbursable under Med Pay:

- Emergency transport and treatment by a provider licensed under ch. 401, F.S.
- Emergency services and care provided by a hospital licensed under ch. 395, F.S.
- Emergency services and care as defined in s. 395.002, F.S., provided in a facility licensed under ch. 395, F.S., and rendered by a physician or dentist, and related hospital inpatient services rendered by a physician or dentist.
- Hospital inpatient services, other than emergency services and care.
- Hospital outpatient services, other than emergency services and care.
- Physician services and care provided by a physician licensed under ch. 458, F.S., or ch. 459, F.S., or a chiropractic physician licensed under ch. 460, F.S., or dental services and care provided by a dentist licensed under ch. 466, F.S.

Medical Fee Schedule for Med Pay Reimbursement

Medical payments coverage reimbursement contains a medical fee schedule that is similar to the fee schedule for PIP.⁵³ The primary difference is that whereas PIP reimbursed 80 percent of

⁵¹ Footnotes in the Effect of Proposed Changes section of this analysis refer to the statutory citations contained in CS/SB 150, and not current law.

⁵² A licensed physician, licensed dentist, licensed chiropractor, by a person or entity licensed under part III of ch. 401, F.S. Initial services and care may also be provided in a licensed hospital, or in a facility that owns or is wholly owned by a licensed hospital.

⁵³ See s. 627.7265(5)(a), F.S.

charges made under the fee schedule, Med Pay reimburses 100 percent of such charges. The fee schedule allows insurers to limit reimbursement to the following:

- Emergency services transport and treatment by licensed medical transportation service 200 percent of Medicare.
- Emergency services and care provided by a licensed hospital 75 percent of a hospital's usual and customary charges.
- Emergency services and care and related hospital inpatient services provided by a licensed physician or dentist, if rendered in a facility licensed under ch. 395, F.S., (hospitals, ambulatory surgical centers, and mobile surgical facilities) usual and customary charges in the community.
- Hospital inpatient services other than emergency services and care 200 percent of the Medicare Part A prospective payment applicable to the specific hospital providing the inpatient services.
- Hospital outpatient services other than emergency services and care 200 percent of the Medicare Part A Ambulatory Payment Classification for that particular hospital.

The bill does not retain the provisions in the fee schedule that limits reimbursement for all other medical supplies, services, and care to 200 percent of the participating physician's fee schedule of Medicare Part B, and details the reimbursement amounts for the following:

- Services, supplies, and care provided by ambulatory surgical centers and clinical laboratories
 200 percent of Medicare Part B.
- Durable medical equipment 200 percent of the Durable Medical Equipment Prosthetics/Orthotics and Supplies fee schedule of Medicare Part B.
- Services, supplies, or care not reimbursable under Medicare Part B 80 percent of the maximum reimbursement under workers' compensation.
- Services, supplies, or care that are not reimbursable under Medicare or workers' compensation no reimbursement.

Failure to include this provision means that no fee schedule will apply to services and care provided by a licensed physician, a licensed chiropractic physician, or for dental services and care provided by a dentist licensed under ch. 466, F.S., unless those services and care are specified in the fee schedule.

The bill specifies the applicable fee schedules under Medicare and workers' compensation that are the basis of the Med Pay fee schedule. Insurers may not limit the number of treatments or impose other utilization limits that apply under Medicare or workers' compensation.

Providers of medical care may not balance bill insureds when reimbursement is limited by the fee schedule, except for amounts not covered because of Med Pay policy limits.

Insurers that limit reimbursement under the fee schedule must include a notice with the insurance policy at the time of issuance or renewal that the insurer may limit payment pursuant to the fee schedule. A policy form approved by OIR satisfied this requirement.

The bill also specifies that an insurer may pay charges that are for an amount less than the amount allowed under the fee schedule.

Requirements for Billing and Payment of Med Pay Claims

Med Pay retains some provisions in the PIP statute related to payment of medical claims. These include the grounds for an insurer not paying a claim.⁵⁴ Some billing requirements are retained, including requiring providers of medical services to bill insurers for specified services, though the time frames for doing so are not retained,⁵⁵ and using specified forms for billing.⁵⁶

Insurance Fraud Related to Med Pay Claims

The bill retains provisions in the PIP law related to insurance fraud. An insurer may bring a civil action against any person convicted of insurance fraud associated with a Med Pay claim, and may recover punitive damages, attorney fees and costs.⁵⁷ Insurers must send a fraud advisory notice to Med Pay claimants informing them of potential monetary rewards for providing information related to insurance fraud and that claimants should report any solicitation of persons injured in a motor vehicle crash for the purpose of filing a Med Pay claim or lawsuit to the Department of Financial Services.⁵⁸ Claims generated as a result of patient brokering are not reimbursable.⁵⁹

Uninsured and Underinsured Motor Vehicle Insurance Coverage

Section 40 amends s. 627.727, F.S., which governs uninsured and underinsured motor vehicle insurance coverage. The bill deletes subsection (7), under which current law specifies that UM coverage does not include damages in tort for pain, suffering, mental anguish, and inconvenience unless the injury or disease is of sufficient severity under "verbal threshold" s. 627.737(2), F.S. Under PIP, if an injured person's injuries exceed a certain severity threshold, that person cannot recover "pain and suffering" damages from the at-fault driver's bodily injury coverage. Personal injury protection is considered a no-fault coverage because the injured person trades a limitation on the ability to recover pain and suffering damages for the ability to get PIP benefits even if the injured person is at fault in the accident. Uninsured motorist coverage generally provides the policyholder with benefits if the at-fault driver does not have sufficient bodily injury coverage. Current law does not allow the recovery of uninsured motorist benefits for pain and suffering damages unless the injury surpasses the "verbal threshold" because an injured person cannot recovery bodily injury coverage for pain and suffering damages unless the injury is sufficiently severe. The bill repeals the "verbal threshold" contained in the No-Fault Law, thus this corresponding provision is also repealed.

Commercial Motor Vehicle Coverage Requirements

Section 44 amends s. 627.7415, F.S., to increase the minimum levels of combined BI liability and PD liability coverage that commercial motor vehicles must have.

⁵⁴ See s. 627.7265(5)(b), F.S.

⁵⁵ See s. 627.7265(5)(c), F.S.

⁵⁶ See s. 627.7265(5)(d), F.S.

⁵⁷ See s. 627.7265(6), F.S.

⁵⁸ See s. 627.7265(7), F.S.

⁵⁹ See s. 627.7265(8), F.S.

A commercial motor vehicle that weighs 26,000 pounds or more but less than 35,000 pounds must have coverage of no less than \$50,000 per occurrence beginning January 1, 2019; of no less than \$60,000 per occurrence beginning January 1, 2021; and of no less than \$70,000 per occurrence beginning January 1, 2023, and thereafter. Current law requires \$50,000 of coverage.

A commercial motor vehicle that weighs 35,000 pounds or more but less than 44,000 pounds must have coverage of no less than \$100,000 per occurrence beginning January 1, 2019; of no less than \$120,000 per occurrence beginning January 1, 2021; and of no less than \$140,000 per occurrence beginning January 1, 2023, and thereafter. Current law requires \$100,000 of coverage.

Technical and Conforming Changes

Section 3 amends s. 316.646, F.S., which requires drivers to maintain and be able to display proof of security demonstrating compliance with financial responsibility requirements. The bill specifies that any person required by s. 324.022, F.S., to maintain liability security for operating a motor vehicle must have proof of security in his or her immediate possession and deletes references to PIP and amended sections of law.

Section 4 amends s. 318.18(2), F.S., regarding nonmoving traffic violations, to conform cross references.

Section 5 amends s. 320.02, F.S., which contains the requirements to register a motor vehicle. The bill amends the section to require proof of motor vehicle insurance that meets the minimum limits of bodily injury liability, property damage liability, and medical payments coverage.

Section 6 amends s. 320.0609, F.S., regarding transfer and exchange of registration license plates to eliminate a reference to PIP.

Section 9 amends s. 322.251, F.S., regarding notice of cancellation, suspension, or revocation of a driver's license to repeal references to the No-Fault Law.

Section 10 amends s. 322.34, F.S., deleting a reference to the No-Fault Law.

Section 11 amends s. 324.011, F.S., which provides the purpose of ch. 324, F.S., to specify that under the chapter all owners or operators of a motor vehicle required to be registered in this state must establish, maintain and show proof of financial responsibility. Currently, financial responsibility requirements only apply after an operator is involved in a crash or convicted of certain traffic offenses.

Section 14 amends s. 324.0221, F.S., which requires insurers to report motor vehicle insurance cancellations to the DHSMV, to remove references to PIP and insert references to Med Pay coverage and BI liability coverage.

Section 15 corrects cross references in s. 324.023, F.S., which requires drivers who plead guilty or nolo contendere to a charge of driving under the influence to meet additional liability insurance requirements.

Section 18 amends s. 324.051, F.S., regarding crash reports, to refer to motor vehicle liability policies rather than automobile liability policies.

Section 19 amends s. 324.071, F.S., to provide stylistic changes to provisions governing the reinstatement of a suspended license.

Section 20 amends s. 324.091, F.S., which requires owners and operators involved in a crash or conviction case to furnish evidence of liability insurance, by deleting references to automobile liability policy while retaining references to a motor vehicle liability policy.

Section 24 amends s. 324.251, F.S., to revise the short title of ch. 324, F.S., to the "Financial Responsibility Law of 2018" and state it will be effective at 12:01 a.m., on January 1, 2019. Currently the chapter is the "Financial Responsibility Law of 1955."

Section 25 revises the definition of a "clinic" contained in s. 400.9905, F.S., of the Health Care Clinic Act, to replace references to PIP coverage and the Florida Motor Vehicle No-Fault Law with references to Med Pay or bodily injury coverage.

Sections 26 and 27 amend s. 400.991, F.S., and s. 400.9935, F.S., respectively, of the Health Care Clinic Act to remove references to PIP and the No-Fault Law and insert references to Med Pay coverage.

Section 28 revises the definition of a "third party benefit" in s. 409.901, F.S., for purposes of Medicaid to refer to Med Pay rather than PIP coverage.

Section 29 amends s. 409.910(11), F.S., to specify that the Agency for Health Care Administration may recoup the total amount of medical assistance provided by Medicaid from motor vehicle insurance coverage benefits provided to a Medicaid beneficiary. Current law refers to PIP.

Section 30 amends s. 456.057, F.S., regarding patient records, to correct a cross-reference.

Section 31 amends s. 456.072, F.S., which allows the Department of Health to discipline licensees for submitting claims for PIP reimbursement when treatment was not rendered or that is intentionally upcoded, to refer instead to Med Pay coverage.

Section 32 amends s. 626.9541(1)(i) and (o), F.S., regarding unfair insurance trade practices related to motor vehicle insurance. The bill deletes the unfair trade practice in paragraph (i) for failing to pay claims within statutory time periods required under the No-Fault Law to conform to the repeal of those time frames by the bill. The section makes a technical amendment to paragraph (o) to reference Med Pay coverage rather than PIP in the prohibitions against the unfair insurance trade practice of increasing premium or cancelling a motor vehicle insurance policy solely because the insured was involved in a motor vehicle accident without having information the insured was substantially at fault.

Section 33 amends s. 626.989, F.S., to revise the "fraudulent insurance acts" detailed in the section to refer to Med Pay coverage rather than the No-Fault Law.

Section 34 amends s. 627.06501, F.S., regarding insurance discounts for completing a driver improvement course, to delete a reference to PIP and insert a reference to Med Pay.

Sections 35 and 36 amend s. 627.0652, F.S., and s. 627.0653, F.S., respectively, relating to insurance discounts for motor vehicle coverage, by replacing references to PIP with references to Med Pay coverage.

Section 37 amends s. 627.4132, F.S., regarding the general prohibition against stacking of motor vehicle coverages, to refer to BI and PD instead of PIP or other coverage.

Section 38 amends s. 627.7263, F.S., which generally makes rental and leasing driver's insurance primary, to delete references to PIP and insert references to Med Pay.

Section 42 amends s. 627.728, F.S., which governs cancellations of motor vehicle insurance policies, to delete a reference to PIP in the definition of "policy."

Section 43 amends s. 627.7295, F.S., to revise definitions relating to motor vehicle insurance contracts by deleting references to PIP and insert references to BI liability coverage and Med Pay coverage.

Section 45 amends s. 627.8405, F.S., regarding prohibited acts of premium finance companies to replace a reference to a PIP/PD only policy with a reference to a policy that only provides BI/PD/Med Pay.

Section 46 amends s. 627.915, F.S., which requires private passenger automobile insurers to report annually information to the office, to remove references to PIP.

Section 47 amends s. 628.909, F.S., which applies certain provisions of the Insurance Code to captive insurance companies, to delete references to the No-Fault Law.

Section 48 amends s. 705.184, F.S., which governs derelict or abandoned motor vehicles on the premises of public-use airports, to delete references to s. 627.736, F.S., which is repealed by the bill.

Section 49 amends s. 713.78, F.S., regarding liens for recovering, towing, or storing vehicles and vessels, to delete references to s. 627.736, F.S., which is repealed by the bill.

Section 50 amends s. 817.234, F.S., regarding false and fraudulent insurance claims, to delete references to PIP and replace them with references to Med Pay coverage.

Application of Bill and Effective Date

Section 51 applies financial responsibility and medical payments coverage requirements created by the bill as follows:

- Effective January 1, 2019:
 - o All Motor vehicle insurance policies issued or renewed may not include PIP.
 - All persons must maintain at least minimum security requirements, which is the ability to respond to damages for liability because of motor vehicle crashes in the amounts required by s. 324.021, F.S.
 - o Any new or renewal motor vehicle insurance policy delivered or issued in this state must provide coverage that complies with minimum security requirements.
 - New and renewal motor vehicle insurance policies used to prove financial responsibility must provide medical payments coverage.
 - An existing motor vehicle insurance policy that provides PIP and property damage liability coverage but does not meet the new bodily injury liability requirements is deemed to meet the bodily injury and Med Pay requirements until the policy is renewed, non-renewed or cancelled on or after January 1, 2019.
- Insurers must allow each insured who has a policy providing PIP which is effective before January 1, 2019, and whose policy does not meet minimum security requirements, to eliminate PIP coverage and obtain coverage providing minimum security requirements effective on or after January 1, 2019. Insurers may not impose additional fees solely to change coverage, but may charge an additional premium that is actuarially indicated.
- By September 1, 2018, each motor vehicle insurer shall provide notice that:
 - The Florida Motor Vehicle No-Fault Law is repealed effective January 1, 2019, and that PIP coverage is no longer required or available for purchase.
 - That effective January 1, 2019, a person subject to the financial security requirements of s. 324.022, F.S., must maintain medical payments coverage and applicable minimum security requirements for bodily injury liability and property damage liability.
 - That a policyholder may obtain underinsured motorist coverage, which provides benefits to a policyholder entitled to recover bodily injury damages resulting from a motor vehicle accident with an uninsured or underinsured owner or operator of a motor vehicle.
 - That a policy effective before January 1, 2019, is deemed to meet minimum security requirements until it is renewed, non-renewed, or canceled.
 - That a policyholder may change coverages to eliminate PIP protection and obtain coverage providing minimum security requirements.
 - That if the policyholder has any questions, he or she should contact the person named at the telephone number provided in the notice.

This section is effective upon the act becoming a law.

Section 52 requires all suspensions for failure to maintain required security as required by law in effect before January 1, 2019, remain in full force and effect after the effective date of this act. A driver may reinstate a suspended driver's license or registration as provided under s. 324.0221, F.S.

Section 53 provides that except as otherwise expressly provided in the act and this section, which take effect upon this act becoming a law, the act is effective January 1, 2019.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

None.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

V. Fiscal Impact Statement:

A. Tax/Fee Issues:

Bodily injury coverage is not a required coverage under Florida law unless a person is involved in certain accidents causing bodily injury, convicted of certain offenses, or is otherwise required to maintain BI liability coverage in statute. Failure to maintain BI coverage, when required, can result in the suspension of a license or registration. The reinstatement fee under s. 324.071, F.S., for such suspension under current law is \$15. The bill retains this reinstatement fee for a license suspension based upon a crash report under s. 324.051(2), F.S.; a registration suspension under s. 324.072, F.S., based on a license suspension pursuant to s. 322.26, F.S., or s. 322.27, F.S.; suspension of the operating privileges of a nonresident driver under s. 324.081, F.S.; or suspension of license and registration under s. 324.121, F.S., for failure to satisfy a judgment.

The bill retains the current reinstatement fees under s. 324.0221, F.S., for a suspended license or registration for failure to maintain required insurance based on a report by an insurer. The reinstatement fee for such suspensions under s. 324.0221, F.S., is \$150 for a first reinstatement, while second and subsequent reinstatements within 3 years of the first reinstatement require fees of \$250 and \$500, respectively.

B. Private Sector Impact:

The report *Florida Office of Insurance Regulation: Review of Personal Injury Protection Legislation* provides actuarial estimates of the savings expected from repealing the No-Fault Law. ⁶⁰ The charts in this section are taken from data in Appendix 2 and Appendix 3 of the report.

The following chart provides the statewide average premium for each auto insurance coverage under current law and premium estimates if the No-Fault Law is repealed and replaced with mandatory financial responsibility for bodily injury and mandatory medical payments coverage.

⁶⁰ Office of Insurance Regulation, *Review of Personal Injury Protection Legislation*, (Sept. 13, 2016). Available at http://www.floir.com/siteDocuments/FLOIRReviewPIP20160913.pdf (last viewed December 4, 2017).

Average Annual Statewide Premium Paid by Coverage and
Estimates of Average Statewide Premium ⁶¹

Coverage	Current Law 10/20/10 PIP/PD	Repeal PIP & Mandate 15/30/5 BI/MedPay	Repeal PIP & Mandate 25/50/5 BI/MedPay
Bodily Injury	\$329.22	\$462.32	\$469.37
PIP/MedPay	\$219.10	\$72.30	\$72.30
Uninsured Motorist	\$111.60	\$122.43	\$122.43
Property Damage	\$180.06	\$180.06	\$180.06
Comprehensive	\$102.03	\$102.03	\$102.03
Collision	\$267.50	\$267.50	\$267.50
TOTAL	\$1,209.51	\$1,206.94	\$1213.69

The chart below provides select average countywide estimates of the change in what policyholders will annually pay in premiums for certain coverages if the No-Fault law is repealed and replaced with a mandate to carry \$5,000 in Med Pay insurance coverage and a financial responsibility requirement for bodily injury. The 2016 PIP Study indicated that replacing the \$10,000 PIP requirement with a \$5,000 Med Pay coverage requirement would lower the premium paid for first-party medical motor vehicle insurance coverage. This reduction is offset by increases in premium for bodily injury liability coverage and uninsured motorist's coverage.

County	Avg. MedPay 5	Avg. BI 15/30	Avg. BI 25/50	Avg. UM
Alachua	- \$84.83	+ \$101.03	+ \$106.15	+ \$8.88
Brevard	- \$94.07	+ \$113.84	+ \$119.60	+ \$9.66
Desoto	- \$121.87	+ \$107.98	+ \$113.44	+ \$9.30
Duval	- \$117.42	+ \$124.26	+ \$130.55	+ \$9.39
Escambia	- \$96.47	+ \$101.05	+ \$106.17	+ \$8.30
Hillsborough	- \$177.01	+ \$162.66	+ \$170.89	+ \$12.15
Leon	- \$82.88	+ \$102.79	+ \$107.99	+ \$8.36
Miami/Dade	- \$279.50	+ \$138.64	+ \$145.65	+ \$12.77
Orange	- \$161.52	+ \$131.99	+ \$138.67	+ \$9.94

The 2016 PIP Study estimated that health insurers would cover approximately \$469.7 million of current PIP loss if No-Fault were repealed. 62 Health care providers will cover

⁶¹ The header on the chart details the current minimum mandatory coverage limit for PIP/PD and possible minimum mandatory coverage limits for BI/Med Pay. The statewide average premiums are for the coverages at any policy limit, not the minimum required limits under state law.

⁶²Office of Insurance Regulation, Florida Office of Insurance Regulation Review of Personal Injury Protection Legislation, pg. 6 (September 13, 2016).

approximately \$32.8 million of current PIP losses. Injured claimants will cover approximately \$82.9 million of current PIP losses.

The actuarial consulting firm Milliman, Inc., estimated the impact of HB 19, which is the House companion to Senate Bill 250, on behalf of the Property and Casualty Insurers Association of America. The Milliman report, dated January 25, 2018, estimates that repealing PIP and mandating BI coverage of at least \$25,000/\$50,000 would increase premiums on average by \$67 (5.3 percent), increase premiums on average for drivers that currently purchase full coverage by \$105 (7.2 percent), and increase premiums on average \$230 (50.1 percent) for drivers who currently purchase only PIP and PD at the minimum mandatory limits. The report estimates that mandating \$5,000 of MedPay in addition to mandating BI coverage of at least \$25,000/\$50,000 would increase premiums on average by \$115.85 (9.2 percent). The report identifies as cost-drivers increasing premium the elimination of the No-Fault verbal threshold for noneconomic damages and the elimination of the PIP co-insurance provisions (20 percent for medical expenses and 40 percent for loss of income expenses).

C. Government Sector Impact:

The DHSMV recommends the implementation of an education effort to raise awareness of the changes to the insurance and financial responsibility laws in partnership with the insurance industry.⁶⁶ This campaign can be accomplished within existing resources at the department.

The Office of Insurance Regulation has indicated it will need \$63,651 from the Insurance Regulatory Trust Fund for an additional actuarial analyst position and \$20,000 from the Insurance Regulatory Trust Fund for contracted services to update the Rate Collection System.

VI. Technical Deficiencies:

Lines 1845 through 1848 specify that Med Pay provides reimbursement for physician services and care provided by a physician or chiropractic physician with necessary licensure, and dental services and care provided by a dentist with necessary licensure. The Med Pay fee schedule on lines 1901 through 1994 does not address such services.

The notice on lines 2877 through 2901 describing Med Pay coverage should be amended to explain that Med Pay provides reimbursement for services provided by physicians, chiropractic physicians and dentists.

VII. Related Issues:

None.

⁶³ Milliman, Inc., Florida Personal Auto Insurance Impact of Repealing No-Fault Coverage – Prepared for Property Casualty Insurers Association of America, pg. 4 (Jan. 25, 2018).

⁶⁴ See Milliman at pg. 6.

⁶⁵ See Milliman at pgs. 9-10.

⁶⁶ Department of Highway Safety and Motor Vehicles, 2018 Agency Legislative Bill Analysis SB 150 (January 4, 2018).

VIII. Statutes Affected:

This bill substantially amends the following sections of the Florida Statutes: 316.646, 318.18, 320.02, 320.0609, 320.27, 320.771, 322.251, 322.34, 324.011, 324.021, 324.022, 324.0221, 324.023, 324.031, 324.032, 324.051, 324.071, 324.091, 324.151, 324.161, 324.171, 324.251, 400.9905, 400.991, 400.9935, 409.901, 409.910, 456.057, 456.072, 626.9541, 626.989, 627.06501, 627.0652, 627.0653, 627.4132, 627.7263, 627.727, 627.7275, 627.728, 627.7295, 627.7415, 627.8405, 627.915, 628.909, 705.184, 713.78, and 817.234.

This bill creates section 627.7265 of the Florida Statutes.

This bill repeals the following sections of the Florida Statutes: 627.730, 627.731, 627.7311, 627.732, 627.733, 627.734, 627.736, 627.737, 627.739, 627.7401, 627.7403, 627.7405, and 627.7407.

IX. Additional Information:

A. Committee Substitute – Statement of Substantial Changes:

(Summarizing differences between the Committee Substitute and the prior version of the bill.)

CS by Banking and Insurance on January 10, 2018:

The CS makes the following substantial changes:

- Reinstates existing law applying financial responsibility requirements (usually through maintaining motor vehicle insurance) to registrants of motor vehicles, rather than registrants and all operators (which would encompass all persons with a Florida driver's license).
- Deletes a provision requiring liability coverage to pay for legal fees imposed because of the insurer's defense of the claim.
- Deletes provisions expanding the statutory requirements for the scope of motor vehicle liability insurance.
- Deletes an unfair insurance trade practice related to failure to timely pay claims as required by the No-Fault Law.
- Deletes provisions in the underlying bill that would have retained provisions in the No-Fault Law within the Med Pay insurance statute. The deletions include requirements for:
 - o Billing and payment of claims.
 - o Claimant compliance with Med Pay claims investigations.
 - o Prohibitions against certain acts by insurers.
 - o Claimant demand letters and bringing claims in a single action.
 - o Insurer subrogation rights.
- Deletes the fee schedule limits for services and care provided by a physician, chiropractor, or dentist.
- Reinstates the current \$15 fee to reinstate a driver's license or vehicle registration for specified offenses, rather than increasing the fee.

B. Amendments:

None.

This Senate Bill Analysis does not reflect the intent or official position of the bill's introducer or the Florida Senate.



	LEGISLATIVE ACTION	
Senate	•	House
Comm: UNFAV	•	
02/28/2018	•	
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Appropriations Subcommittee on Health and Human Services (Rouson) recommended the following:

Senate Amendment

Delete line 1821

4 and insert:

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limit of at least \$15,000 per person for medical expense

incurred



	LEGISLATIVE ACTION	
Senate		House
Comm: UNFAV		
02/28/2018		
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Appropriations Subcommittee on Health and Human Services (Lee) recommended the following:

Senate Amendment

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Between lines 1936 and 1937

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insert:

f. For all other medical services, supplies, and care, 200 percent of the allowable amount under:

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(I) The participating physician fee schedule of Medicare Part B, except as provided in sub-sub-subparagraphs (II) and (III).

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(II) Medicare Part B, in the case of services, supplies,



11	and care provided by ambulatory surgical centers and clinical
12	laboratories.
13	(III) The Durable Medical Equipment Prosthetics/Orthotics
14	and Supplies fee schedule of Medicare Part B, in the case of
15	durable medical equipment.



	LEGISLATIVE ACTION	
Senate		House
Comm: UNFAV		
02/28/2018		
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Appropriations Subcommittee on Health and Human Services (Lee) recommended the following:

Senate Amendment

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Delete lines 2886 - 2901

4 and insert:

> benefit of at least \$5,000. Medical payments coverage provides reimbursement for the following if medically necessary and if an individual initially receives such treatment within 14 days after the motor vehicle accident:

- 1. Emergency transportation and treatment.
- 2. Emergency services and care provided by a hospital.

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- 3. Emergency services and care provided by a licensed physician or licensed dentist in a hospital, ambulatory surgical center, or mobile surgical facility licensed under chapter 395, Florida Statutes, and related hospital inpatient care.
- 4. Hospital inpatient services, other than emergency services and care.
- 5. Hospital outpatient services, other than emergency services and care.
- 6. Physician services and care provided by a physician licensed under chapter 458 or chapter 459, Florida Statutes, or by a chiropractic physician licensed under chapter 460, Florida Statutes, or dental services and care provided by a dentist licensed under chapter 466, Florida Statutes.



	LEGISLATIVE ACTION	
Senate	•	House
Comm: FAV	•	
02/28/2018	•	
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Appropriations Subcommittee on Health and Human Services (Lee) recommended the following:

Senate Amendment (with title amendment)

3 Between lines 2932 and 2933

insert:

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Section 53. For the 2018-2019 fiscal year, the sum of \$83,651 in nonrecurring funds is appropriated from the Insurance Regulatory Trust Fund to the Office of Insurance Regulation for the purpose of implementing this act.

======= T I T L E A M E N D M E N T =======



11	And the title is amended as follows:	
12	Delete line 178	
13	and insert:	
14	specified date; providing an appropriation; providing	
15	effective dates.	
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	LEGISLATIVE ACTION	
Senate		House
Comm: UNFAV		
02/28/2018		
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Appropriations Subcommittee on Health and Human Services (Passidomo) recommended the following:

Senate Amendment (with title amendment)

Delete everything after the enacting clause and insert:

Section 1. Sections 627.730, 627.731, 627.7311, 627.732, <u>627.733, 627.734, 627.73</u>6, 627.737, 627.739, 627.7401, 627.7403, and 627.7405, Florida Statutes, which comprise the Florida Motor Vehicle No-Fault Law, are repealed.

Section 2. Section 627.7407, Florida Statutes, is repealed. Section 3. Subsection (1) of section 316.646, Florida

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Statutes, is amended to read:

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

- (1) Any person required by s. 324.022 to maintain liability security for property damage, liability security, required by s. 324.023 to maintain liability security for bodily injury, or death, or required by s. 627.733 to maintain personal injury protection security on a motor vehicle shall have in his or her immediate possession at all times while operating such motor vehicle proper proof of maintenance of the required security required under s. 324.021(7).
- (a) Such proof must shall be in a uniform paper or electronic format, as prescribed by the department, a valid insurance policy, an insurance policy binder, a certificate of insurance, or such other proof as may be prescribed by the department.
- (b) 1. The act of presenting to a law enforcement officer an electronic device displaying proof of insurance in an electronic format does not constitute consent for the officer to access any information on the device other than the displayed proof of insurance.
- 2. The person who presents the device to the officer assumes the liability for any resulting damage to the device.
- Section 4. Paragraph (b) of subsection (2) of section 318.18, Florida Statutes, is amended to read:
- 318.18 Amount of penalties. The penalties required for a noncriminal disposition pursuant to s. 318.14 or a criminal offense listed in s. 318.17 are as follows:
 - (2) Thirty dollars for all nonmoving traffic violations



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- (b) For all violations of ss. 320.0605, 320.07(1), 322.065, and 322.15(1). A Any person who is cited for a violation of s. 320.07(1) shall be charged a delinquent fee pursuant to s. 320.07(4).
- 1. If a person who is cited for a violation of s. 320.0605 or s. 320.07 can show proof of having a valid registration at the time of arrest, the clerk of the court may dismiss the case and may assess a dismissal fee of up to \$10. A person who finds it impossible or impractical to obtain a valid registration certificate must submit an affidavit detailing the reasons for the impossibility or impracticality. The reasons may include, but are not limited to, the fact that the vehicle was sold, stolen, or destroyed; that the state in which the vehicle is registered does not issue a certificate of registration; or that the vehicle is owned by another person.
- 2. If a person who is cited for a violation of s. 322.03, s. 322.065, or s. 322.15 can show a driver license issued to him or her and valid at the time of arrest, the clerk of the court may dismiss the case and may assess a dismissal fee of up to \$10.
- 3. If a person who is cited for a violation of s. 316.646 can show proof of security as required by s. 324.021(7) s. 627.733, issued to the person and valid at the time of arrest, the clerk of the court may dismiss the case and may assess a dismissal fee of up to \$10. A person who finds it impossible or impractical to obtain proof of security must submit an affidavit detailing the reasons for the impracticality. The reasons may include, but are not limited to, the fact that the vehicle has

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since been sold, stolen, or destroyed; that the owner registrant of the vehicle is not required by s. 627.733 to maintain personal injury protection insurance; or that the vehicle is owned by another person.

Section 5. Paragraphs (a) and (d) of subsection (5) of section 320.02, Florida Statutes, are amended to read:

320.02 Registration required; application for registration; forms.-

(5)(a) Proof that bodily injury liability coverage and property damage liability coverage personal injury protection benefits have been purchased if required under s. 324.022, s. 324.032, or s. 627.742 s. 627.733, that property damage liability coverage has been purchased as required under s. 324.022, that bodily injury liability or death coverage has been purchased if required under s. 324.023, and that combined bodily liability insurance and property damage liability insurance have been purchased if required under s. 627.7415 must shall be provided in the manner prescribed by law by the applicant at the time of application for registration of any motor vehicle that is subject to such requirements. The issuing agent may not shall refuse to issue registration if such proof of purchase is not provided. Insurers shall furnish uniform proof-of-purchase cards in a paper or electronic format in a form prescribed by the department and include the name of the insured's insurance company, the coverage identification number, and the make, year, and vehicle identification number of the vehicle insured. The card must contain a statement notifying the applicant of the penalty specified under s. 316.646(4). The card or insurance policy, insurance policy binder, or certificate of insurance or



98 a photocopy of any of these; an affidavit containing the name of 99 the insured's insurance company, the insured's policy number, 100 and the make and year of the vehicle insured; or such other 101 proof as may be prescribed by the department constitutes shall 102 constitute sufficient proof of purchase. If an affidavit is 103 provided as proof, it must be in substantially the following 104 form: 105 106 Under penalty of perjury, I ... (Name of insured) ... do hereby 107 certify that I have ... (bodily injury liability and Personal Injury Protection, property damage liability coverage, and, if 108 109 required, Bodily Injury Liability) ... Insurance currently in 110 effect with ... (Name of insurance company) ... under ... (policy 111 number) ... covering ... (make, year, and vehicle identification 112 number of vehicle) (Signature of Insured) ... 113 114 Such affidavit must include the following warning: 115 116 WARNING: GIVING FALSE INFORMATION IN ORDER TO OBTAIN A VEHICLE 117 REGISTRATION CERTIFICATE IS A CRIMINAL OFFENSE UNDER FLORIDA 118 LAW. ANYONE GIVING FALSE INFORMATION ON THIS AFFIDAVIT IS SUBJECT TO PROSECUTION. 119 120 If an application is made through a licensed motor vehicle 121 122 dealer as required under s. 319.23, the original or a photocopy 123 photostatic copy of such card, insurance policy, insurance 124 policy binder, or certificate of insurance or the original

affidavit from the insured must shall be forwarded by the dealer to the tax collector of the county or the Department of Highway

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Safety and Motor Vehicles for processing. By executing the aforesaid affidavit, a no licensed motor vehicle dealer is not will be liable in damages for any inadequacy, insufficiency, or falsification of any statement contained therein. A card must also indicate the existence of any bodily injury liability insurance voluntarily purchased.

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

Section 6. Paragraph (b) of subsection (1) of section 320.0609, Florida Statutes, is amended to read: 320.0609 Transfer and exchange of registration license



156 plates; transfer fee.-

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- (b) The transfer of a license plate from a vehicle disposed of to a newly acquired vehicle does not constitute a new registration. The application for transfer shall be accepted without requiring proof of personal injury protection or liability insurance.
- Section 7. Paragraph (g) is added to subsection (1) of section 320.27, Florida Statutes, and subsection (3) of that section is amended, to read:
 - 320.27 Motor vehicle dealers.-
- (1) DEFINITIONS.—The following words, terms, and phrases when used in this section have the meanings respectively ascribed to them in this subsection, except where the context clearly indicates a different meaning:
- (g) "Garage liability insurance" means combined singlelimit liability coverage, including property damage and bodily injury liability coverage, in the amount of:
- 1. Beginning January 1, 2019, and continuing through December 31, 2020, at least \$50,000.
- 2. Beginning January 1, 2021, and continuing through December 31, 2022, at least \$60,000.
- 3. Beginning January 1, 2023 and thereafter, at least \$70,000.
- (3) APPLICATION AND FEE.—The application for the license application must shall be in such form as may be prescribed by the department and is shall be subject to such rules with respect thereto as may be so prescribed by the department it. Such application must shall be verified by oath or affirmation

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and must shall contain a full statement of the name and birth date of the person or persons applying for the license therefor; the name of the firm or copartnership, with the names and places of residence of all members thereof, if such applicant is a firm or copartnership; the names and places of residence of the principal officers, if the applicant is a body corporate or other artificial body; the name of the state under whose laws the corporation is organized; the present and former place or places of residence of the applicant; and the prior business in which the applicant has been engaged and its the location thereof. The Such application must shall describe the exact location of the place of business and must shall state whether the place of business is owned by the applicant and when acquired, or, if leased, a true copy of the lease must shall be attached to the application. The applicant shall certify that the location provides an adequately equipped office and is not a residence; that the location affords sufficient unoccupied space upon and within which adequately to store all motor vehicles offered and displayed for sale; and that the location is a suitable place where the applicant can in good faith carry on such business and keep and maintain books, records, and files necessary to conduct such business, which must shall be available at all reasonable hours to inspection by the department or any of its inspectors or other employees. The applicant shall certify that the business of a motor vehicle dealer is the principal business that will which shall be conducted at that location. The application must shall contain a statement that the applicant is either franchised by a manufacturer of motor vehicles, in which case the name of each

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motor vehicle that the applicant is franchised to sell must shall be included, or an independent (nonfranchised) motor vehicle dealer. The application must shall contain other relevant information as may be required by the department. The applicant must furnish, including evidence, in a form approved by the department, that the applicant is insured under a garage liability insurance policy or a general liability insurance policy coupled with a business automobile policy having the garage liability insurance coverage required by this subsection, which shall include, at a minimum, \$25,000 combined single-limit liability coverage including bodily injury and property damage protection and \$10,000 personal injury protection. However, a salvage motor vehicle dealer as defined in subparagraph (1)(c)5. is exempt from the requirements for garage liability insurance and personal injury protection insurance on those vehicles that cannot be legally operated on roads, highways, or streets in this state. Franchise dealers must submit a garage liability insurance policy, and all other dealers must submit a garage liability insurance policy or a general liability insurance policy coupled with a business automobile policy. Such policy must shall be for the license period, and evidence of a new or continued policy must shall be delivered to the department at the beginning of each license period. Upon making an initial application, the applicant shall pay to the department a fee of \$300 in addition to any other fees required by law. Applicants may choose to extend the licensure period for 1 additional year for a total of 2 years. An initial applicant shall pay to the department a fee of \$300 for the first year and \$75 for the second year, in addition to any other fees required by law. An

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applicant for renewal shall pay to the department \$75 for a 1year renewal or \$150 for a 2-year renewal, in addition to any other fees required by law. Upon making an application for a change of location, the applicant person shall pay a fee of \$50 in addition to any other fees now required by law. The department shall, in the case of every application for initial licensure, verify whether certain facts set forth in the application are true. Each applicant, general partner in the case of a partnership, or corporate officer and director in the case of a corporate applicant shall, must file a set of fingerprints with the department for the purpose of determining any prior criminal record or any outstanding warrants. The department shall submit the fingerprints to the Department of Law Enforcement for state processing and forwarding to the Federal Bureau of Investigation for federal processing. The actual cost of state and federal processing must shall be borne by the applicant and is in addition to the fee for licensure. The department may issue a license to an applicant pending the results of the fingerprint investigation, which license is fully revocable if the department subsequently determines that any facts set forth in the application are not true or correctly represented.

Section 8. Paragraph (j) of subsection (3) of section 320.771, Florida Statutes, is amended to read:

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



(j) A statement that the applicant is insured under a garage liability insurance policy in accordance with s. 320.27(1)(g), which shall include, at a minimum, \$25,000 combined single-limit liability coverage, including bodily injury and property damage protection, and \$10,000 personal injury protection, if the applicant is to be licensed as a dealer in, or intends to sell, recreational vehicles.

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

Section 9. Subsections (1) and (2) of section 322.251, Florida Statutes, are amended to read:

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

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

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of the licensee's driving privilege.

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

Section 10. Paragraph (a) of subsection (8) of section 322.34, Florida Statutes, is amended to read:

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

- (8)(a) Upon the arrest of a person for the offense of driving while the person's driver license or driving privilege is suspended or revoked, the arresting officer shall determine:
- 1. Whether the person's driver license is suspended or revoked.
- 2. Whether the person's driver license has remained suspended or revoked since a conviction for the offense of driving with a suspended or revoked license.
- 3. Whether the suspension or revocation was made under s. 316.646 or s. 627.733, relating to failure to maintain required security, or under s. 322.264, relating to habitual traffic offenders.
 - 4. Whether the driver is the registered owner or coowner of



the vehicle.

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Section 11. Section 324.011, Florida Statutes, is amended to read:

324.011 Legislative intent and purpose of chapter.—It is the Legislature's intent of this chapter to ensure that the privilege of owning or operating a motor vehicle in this state be exercised recognize the existing privilege to own or operate a motor vehicle on the public streets and highways of this state when such vehicles are used with due consideration for others' safety others and their property, and to promote safety, and to provide financial security requirements for such owners and or operators whose responsibility it is to recompense others for injury to person or property caused by the operation of a motor vehicle. Therefore, this chapter requires that every owner or operator of a motor vehicle required to be registered in this state establish, maintain, and it is required herein that the operator of a motor vehicle involved in a crash or convicted of certain traffic offenses meeting the operative provisions of s. 324.051(2) shall respond for such damages and show proof of financial ability to respond for damages arising out of the ownership, maintenance, or use of a motor vehicle in future accidents as a requisite to owning or operating a motor vehicle in this state his or her future exercise of such privileges.

Section 12. Subsections (1) and (7) and paragraph (c) of subsection (9) of section 324.021, Florida Statutes, are amended, and subsection (12) is added to that section, to read:

324.021 Definitions; minimum insurance required.—The following words and phrases when used in this chapter shall, for the purpose of this chapter, have the meanings respectively

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ascribed to them in this section, except in those instances where the context clearly indicates a different meaning:

- (1) MOTOR VEHICLE.—Every self-propelled vehicle that is designed and required to be licensed for use upon a highway, including trailers and semitrailers designed for use with such vehicles, except traction engines, road rollers, farm tractors, power shovels, and well drillers, and every vehicle that is propelled by electric power obtained from overhead wires but not operated upon rails, but not including any personal delivery device as defined in s. 316.003, bicycle, or moped. However, the term "motor vehicle" does not include a motor vehicle as defined in s. 627.732(3) when the owner of such vehicle has complied with the requirements of ss. 627.730-627.7405, inclusive, unless the provisions of s. 324.051 apply; and, in such case, the applicable proof of insurance provisions of s. 320.02 apply.
- (7) PROOF OF FINANCIAL RESPONSIBILITY.—That Proof of ability to respond in damages for liability on account of crashes arising out of the ownership, maintenance, or use of a motor vehicle:
- (a) With respect to a motor vehicle that is not a commercial motor vehicle, nonpublic sector bus, or for-hire passenger transportation vehicle:
- 1. Beginning January 1, 2019, and continuing through December 31, 2020, in the amount of:
- a. Twenty thousand dollars for \$10,000 because of bodily injury to, or the death of, one person in any one crash and, +
- (b) subject to such limits for one person, in the amount of \$40,000 for \$20,000 because of bodily injury to, or the death of, two or more persons in any one crash; and



388 b. Ten thousand dollars for damage to, or destruction of, 389 property of others in any one crash. 390 2. Beginning January 1, 2021, and continuing through 391 December 31, 2022, in the amount of: 392 a. Twenty-five thousand dollars for bodily injury to, or 393 the death of, one person in any one crash and, subject to such 394 limits for one person, in the amount of \$50,000 for bodily 395 injury to, or the death of, two or more persons in any one 396 crash; and 397 b. Ten thousand dollars for damage to, or destruction of, 398 property of others in any one crash. 399 3. Beginning January 1, 2023, and continuing thereafter, in 400 the amount of: 401 a. Thirty thousand dollars for bodily injury to, or the 402 death of, one person in any one crash and, subject to such 403 limits for one person, in the amount of \$60,000 for bodily 404 injury to, or the death of, two or more persons in any one 405 crash; and 406 b. (c) Ten thousand dollars for damage In the amount of 407 \$10,000 because of injury to, or destruction of, property of 408 others in any one crash.; and 409 (b) (d) With respect to commercial motor vehicles and nonpublic sector buses, in the amounts specified in s. 627.7415 410 411 ss. 627.7415 and 627.742, respectively. 412 (c) With respect to nonpublic sector buses, in the amounts 413 specified in s. 627.742. 414 (d) With respect to for-hire passenger transportation 415 vehicles, in the amounts specified in s. 324.032.

(9) OWNER; OWNER/LESSOR.-



(c) Application.-

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- 1. The limits on liability in subparagraphs (b) 2. and 3. do not apply to an owner of motor vehicles that are used for commercial activity in the owner's ordinary course of business, other than a rental company that rents or leases motor vehicles. For purposes of this paragraph, the term "rental company" includes only an entity that is engaged in the business of renting or leasing motor vehicles to the general public and that rents or leases a majority of its motor vehicles to persons with no direct or indirect affiliation with the rental company. The term also includes a motor vehicle dealer that provides temporary replacement vehicles to its customers for up to 10 days. The term "rental company" also includes:
- a. A related rental or leasing company that is a subsidiary of the same parent company as that of the renting or leasing company that rented or leased the vehicle.
- b. The holder of a motor vehicle title or an equity interest in a motor vehicle title if the title or equity interest is held pursuant to or to facilitate an asset-backed securitization of a fleet of motor vehicles used solely in the business of renting or leasing motor vehicles to the general public and under the dominion and control of a rental company, as described in this subparagraph, in the operation of such rental company's business.
- 2. Furthermore, with respect to commercial motor vehicles as defined in s. 207.002 or s. 320.01 $\frac{1}{8.627.732}$, the limits on liability in subparagraphs (b)2. and 3. do not apply if, at the time of the incident, the commercial motor vehicle is being used in the transportation of materials found to be hazardous for the

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purposes of the Hazardous Materials Transportation Authorization Act of 1994, as amended, 49 U.S.C. ss. 5101 et seq., and that is required pursuant to such act to carry placards warning others of the hazardous cargo, unless at the time of lease or rental either:

- a. The lessee indicates in writing that the vehicle will not be used to transport materials found to be hazardous for the purposes of the Hazardous Materials Transportation Authorization Act of 1994, as amended, 49 U.S.C. ss. 5101 et seq.; or
- b. The lessee or other operator of the commercial motor vehicle has in effect insurance with limits of at least \$5 million \$5,000,000 combined property damage and bodily injury liability.
- (12) FOR-HIRE PASSENGER TRANSPORTATION VEHICLE.—Every "forhire vehicle" as defined in s. 320.01(15) which is offered or used to provide transportation for persons, including taxicabs, limousines, and jitneys.

Section 13. Section 324.022, Florida Statutes, is amended to read:

- 324.022 Financial responsibility requirements for property damage.-
- (1) (a) Every owner or operator of a motor vehicle required to be registered in this state shall establish and continuously maintain the ability to respond in damages for liability on account of accidents arising out of the use of the motor vehicle in the amount of:
- 1. Beginning January 1, 2019, and continuing through December 31, 2020:
 - a. Twenty thousand dollars for bodily injury to, or the

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475 death of, one person in any one crash and, subject to such 476 limits for one person, in the amount of \$40,000 for bodily injury to, or the death of, two or more persons in any one 477 478 crash; and

- b. Ten thousand dollars for damage to, or destruction of, property of others in any one crash.
- 2. Beginning January 1, 2021, and continuing through December 31, 2022:
- a. Twenty-five thousand dollars for bodily injury to, or the death of, one person in any one crash and, subject to such limits for one person, in the amount of \$50,000 for bodily injury to, or the death of, two or more persons in any one crash; and
- b. Ten thousand dollars for damage to, or destruction of, property of others in any one crash.
 - 3. Beginning January 1, 2023, and continuing thereafter:
- a. Thirty thousand dollars for bodily injury to, or the death of, one person in any one crash and, subject to such limits for one person, in the amount of \$60,000 for bodily injury to, or the death of, two or more persons in any one crash; and
- b. Ten thousand dollars for \$10,000 because of damage to, or destruction of, property of others in any one crash.
- (b) The requirements of paragraph (a) this section may be met by one of the methods established in s. 324.031; by selfinsuring as authorized by s. 768.28(16); or by maintaining a motor vehicle liability insurance policy that an insurance policy providing coverage for property damage liability in the amount of at least \$10,000 because of damage to, or destruction

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of, property of others in any one accident arising out of the use of the motor vehicle. The requirements of this section may also be met by having a policy which provides combined property damage liability and bodily injury liability coverage for any one crash arising out of the ownership, maintenance, or use of a motor vehicle which conforms to the requirements of s. 324.151 in the amount of:

- 1. At least \$50,000 for every owner or operator subject to the financial responsibility required in subparagraph (1)(a)1.
- 2. At least \$60,000 for every owner or operator subject to the financial responsibility required in subparagraph (1)(a)2.
- 3. At least \$70,000 for every owner or operator subject to the financial responsibility required in subparagraph (1)(a)3. \$30,000 for combined property damage liability and bodily injury liability for any one crash arising out of the use of the motor vehicle. The policy, with respect to coverage for property damage liability, must meet the applicable requirements of s. 324.151, subject to the usual policy exclusions that have been approved in policy forms by the Office of Insurance Regulation. No insurer shall have any duty to defend uncovered claims irrespective of their joinder with covered claims.
 - (2) As used in this section, the term:
- (a) "Motor vehicle" means any self-propelled vehicle that has four or more wheels and that is of a type designed and required to be licensed for use on the highways of this state, and any trailer or semitrailer designed for use with such vehicle. The term does not include the following:
 - 1. A mobile home as defined in s. 320.01.
 - 2. A motor vehicle that is used in mass transit and

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designed to transport more than five passengers, exclusive of the operator of the motor vehicle, and that is owned by a municipality, transit authority, or political subdivision of the state.

- 3. A school bus as defined in s. 1006.25, which shall maintain security as required under s. 316.615.
- 4. A commercial motor vehicle as defined in s. 207.002 or s. 320.01, which shall maintain security as required under ss. 324.031 and 627.7415.
- 5. A nonpublic sector bus, which shall maintain security as required under ss. 324.031 and 627.742.
- 6.4. A vehicle providing for-hire passenger transportation vehicle, which that is subject to the provisions of s. 324.031. A taxicab shall maintain security as required under s. 324.032 s. 324.032(1).
 - 7.5. A personal delivery device as defined in s. 316.003.
- (b) "Owner" means the person who holds legal title to a motor vehicle or the debtor or lessee who has the right to possession of a motor vehicle that is the subject of a security agreement or lease with an option to purchase.
- (3) Each nonresident owner or registrant of a motor vehicle that, whether operated or not, has been physically present within this state for more than 90 days during the preceding 365 days shall maintain security as required by subsection (1). The security must be that is in effect continuously throughout the period the motor vehicle remains within this state.
- (4) An The owner or registrant of a motor vehicle who is exempt from the requirements of this section if she or he is a member of the United States Armed Forces and is called to or on

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active duty outside the United States in an emergency situation is exempt from this section while he or she. The exemption provided by this subsection applies only as long as the member of the Armed Forces is on such active duty. This exemption outside the United States and applies only while the vehicle covered by the security is not operated by any person. Upon receipt of a written request by the insured to whom the exemption provided in this subsection applies, the insurer shall cancel the coverages and return any unearned premium or suspend the security required by this section. Notwithstanding s. 324.0221(2) s. 324.0221(3), the department may not suspend the registration or operator's license of an any owner or registrant of a motor vehicle during the time she or he qualifies for the an exemption under this subsection. An Any owner or registrant of a motor vehicle who qualifies for the an exemption under this subsection shall immediately notify the department before prior to and at the end of the expiration of the exemption.

Section 14. Subsections (1) and (2) of section 324.0221, Florida Statutes, are amended to read:

324.0221 Reports by insurers to the department; suspension of driver license and vehicle registrations; reinstatement.-

(1)(a) Each insurer that has issued a policy providing personal injury protection coverage or property damage liability coverage shall report the cancellation or nonrenewal thereof to the department within 10 days after the processing date or effective date of each cancellation or nonrenewal. Upon the issuance of a policy providing personal injury protection coverage or property damage liability coverage to a named insured not previously insured by the insurer during that

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calendar year, the insurer shall report the issuance of the new policy to the department within 10 days. The report must shall be in the form and format and contain any information required by the department and must be provided in a format that is compatible with the data processing capabilities of the department. Failure by an insurer to file proper reports with the department as required by this subsection constitutes a violation of the Florida Insurance Code. These records may shall be used by the department only for enforcement and regulatory purposes, including the generation by the department of data regarding compliance by owners of motor vehicles with the requirements for financial responsibility coverage.

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

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which security is required under s. 324.022, s. 324.032, s. 627.7415, or s. 627.742 ss. 324.022 and 627.733 upon:

- (a) The department's records showing that the owner or registrant of such motor vehicle did not have the in full force and effect when required security in full force and effect that complies with the requirements of ss. 324.022 and 627.733; or
- (b) Notification by the insurer to the department, in a form approved by the department, of cancellation or termination of the required security.

Section 15. Section 324.023, Florida Statutes, is amended to read:

324.023 Financial responsibility for bodily injury or death.-In addition to any other financial responsibility required by law, every owner or operator of a motor vehicle that is required to be registered in this state, or that is located within this state, and who, regardless of adjudication of quilt, has been found quilty of or entered a plea of quilty or nolo contendere to a charge of driving under the influence under s. 316.193 after October 1, 2007, shall, by one of the methods established in s. 324.031(1) (a) or (b) s. 324.031(1) or (2), establish and maintain the ability to respond in damages for liability on account of accidents arising out of the use of a motor vehicle in the amount of \$100,000 because of bodily injury to, or death of, one person in any one crash and, subject to such limits for one person, in the amount of \$300,000 because of bodily injury to, or death of, two or more persons in any one crash and in the amount of \$50,000 because of property damage in any one crash. If the owner or operator chooses to establish and maintain such ability by furnishing a certificate of deposit

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pursuant to s. 324.031(1) (b) s. 324.031(2), such certificate of deposit must be at least \$350,000. Such higher limits must be carried for a minimum period of 3 years. If the owner or operator has not been convicted of driving under the influence or a felony traffic offense for a period of 3 years from the date of reinstatement of driving privileges for a violation of s. 316.193, the owner or operator shall be exempt from this section.

Section 16. Section 324.031, Florida Statutes, is amended to read:

324.031 Manner of proving financial responsibility.-

- (1) The owner or operator of a taxicab, limousine, jitney, or any other for-hire passenger transportation vehicle may prove financial responsibility by providing satisfactory evidence of holding a motor vehicle liability policy as defined in s. 324.021(8) or s. 324.151, which policy is issued by an insurance carrier which is a member of the Florida Insurance Guaranty Association. The operator or owner of a motor vehicle other than a for-hire passenger transportation vehicle any other vehicle may prove his or her financial responsibility by:
- (a) (1) Furnishing satisfactory evidence of holding a motor vehicle liability policy as defined in ss. 324.021(8) and 324.151;
- (b) (2) Furnishing a certificate of self-insurance showing a deposit of cash in accordance with s. 324.161; or
- (c) (3) Furnishing a certificate of self-insurance issued by the department in accordance with s. 324.171.
- (2) (a) Any person, including any firm, partnership, association, corporation, or other person, other than a natural

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person, electing to use the method of proof specified in paragraph (1)(b) subsection (2) shall furnish a certificate of deposit equal to the number of vehicles owned times:

- 1. Fifty thousand dollars, to a maximum of \$200,000, from January 1, 2019, through December 31, 2020.
- 2. Sixty thousand dollars, to a maximum of \$240,000, from January 1, 2021, through December 31, 2022.
- 3. Seventy thousand dollars, \$30,000, to a maximum of \$280,000, from January 1, 2023, and thereafter. \$120,000;
- (b) In addition, any such person, other than a natural person, shall maintain insurance providing coverage conforming to the requirements of s. 324.151 in excess of the amount of the certificate of deposit, with limits of at least:
- 1. One hundred twenty-five thousand dollars for bodily injury to, or the death of, one person in any one crash and, subject to such limits for one person, in the amount of \$250,000 for bodily injury to, or the death of, two or more persons in any one crash, and \$50,000 for damage to, or destruction of, property of others in any one crash; or \$10,000/20,000/10,000 or \$30,000 combined single limits, and such excess insurance shall provide minimum limits of \$125,000/250,000/50,000 or \$300,000 combined single limits. These increased limits shall not affect the requirements for proving financial responsibility under s. 324.032(1).
- 2. Three hundred thousand dollars for combined bodily injury liability and property damage liability for any one crash.

Section 17. Section 324.032, Florida Statutes, is amended to read:

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

- (1) An owner or lessee of a for-hire passenger transportation vehicle that is required to be registered in this state shall establish and continuously maintain the ability to respond in damages for liability on account of accidents arising out of the ownership, maintenance, or use of the for-hire passenger transportation vehicle, in the amount of:
- (a) One hundred twenty-five thousand dollars for bodily injury to, or the death of, one person in any one crash and, subject to such limits for one person, in the amount of \$250,000 for bodily injury to, or the death of, two or more persons in any one crash; and A person who is either the owner or a lessee required to maintain insurance under s. 627.733(1)(b) and who operates one or more taxicabs, limousines, jitneys, or any other for-hire passenger transportation vehicles may prove financial responsibility by furnishing satisfactory evidence of holding a motor vehicle liability policy, but with minimum limits of \$125,000/250,000/50,000.
- (b) Fifty thousand dollars for damage to, or destruction of, property of others in any one crash A person who is either the owner or a lessee required to maintain insurance under s. 324.021(9)(b) and who operates limousines, jitneys, or any other for-hire passenger vehicles, other than taxicabs, may prove financial responsibility by furnishing satisfactory evidence of holding a motor vehicle liability policy as defined in s. 324.031.
 - (2) Except as provided in subsection (3), the requirements



of this section must be met by the owner or lessee providing satisfactory evidence of holding a motor vehicle liability policy conforming to the requirements of s. 324.151 which is issued by an insurance carrier that is a member of the Florida Insurance Guaranty Association.

(3) (2) An owner or a lessee who is required to maintain insurance under s. 324.021(9)(b) and who operates at least 300 taxicabs, limousines, jitneys, or any other for-hire passenger transportation vehicles may provide financial responsibility by complying with the provisions of s. 324.171, such compliance to be demonstrated by maintaining at its principal place of business an audited financial statement, prepared in accordance with generally accepted accounting principles, and providing to the department a certification issued by a certified public accountant that the applicant's net worth is at least equal to the requirements of s. 324.171 as determined by the Office of Insurance Regulation of the Financial Services Commission, including claims liabilities in an amount certified as adequate by a Fellow of the Casualty Actuarial Society.

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Upon request by the department, the applicant shall must provide the department at the applicant's principal place of business in this state access to the applicant's underlying financial information and financial statements that provide the basis of the certified public accountant's certification. The applicant shall reimburse the requesting department for all reasonable costs incurred by it in reviewing the supporting information. The maximum amount of self-insurance permissible under this subsection is \$300,000 and must be stated on a per-occurrence



basis, and the applicant shall maintain adequate excess insurance issued by an authorized or eligible insurer licensed or approved by the Office of Insurance Regulation. All risks self-insured shall remain with the owner or lessee providing it, and the risks are not transferable to any other person, unless a policy complying with subsections (1) and (2) subsection (1) is obtained.

Section 18. Paragraph (b) of subsection (2) of section 324.051, Florida Statutes, is amended to read:

324.051 Reports of crashes; suspensions of licenses and registrations.-

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- (b) This subsection does shall not apply:
- 1. To such operator or owner if such operator or owner had in effect at the time of such crash or traffic conviction a motor vehicle an automobile liability policy with respect to all of the registered motor vehicles owned by such operator or owner.
- 2. To such operator, if not the owner of such motor vehicle, if there was in effect at the time of such crash or traffic conviction a motor vehicle an automobile liability policy or bond with respect to his or her operation of motor vehicles not owned by him or her.
- 3. To such operator or owner if the liability of such operator or owner for damages resulting from such crash is, in the judgment of the department, covered by any other form of liability insurance or bond.
- 4. To any person who has obtained from the department a certificate of self-insurance, in accordance with s. 324.171, or



794 to any person operating a motor vehicle for such self-insurer.

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No such policy or bond shall be effective under this subsection unless it contains limits of not less than those specified in s. 324.021(7).

Section 19. Section 324.071, Florida Statutes, is amended to read:

324.071 Reinstatement; renewal of license; reinstatement fee. -An Any operator or owner whose license or registration has been suspended pursuant to s. 324.051(2), s. 324.072, s. 324.081, or s. 324.121 may effect its reinstatement upon compliance with the provisions of s. 324.051(2)(a)3. or 4., or s. 324.081(2) and (3), as the case may be, and with one of the provisions of s. 324.031 and upon payment to the department of a nonrefundable reinstatement fee of \$15. Only one such fee may shall be paid by any one person regardless irrespective of the number of licenses and registrations to be then reinstated or issued to such person. All Such fees must shall be deposited to a department trust fund. If When the reinstatement of any license or registration is effected by compliance with s. 324.051(2)(a)3. or 4., the department may shall not renew the license or registration within a period of 3 years after from such reinstatement, nor may shall any other license or registration be issued in the name of such person, unless the operator continues is continuing to comply with one of the provisions of s. 324.031.

Section 20. Subsection (1) of section 324.091, Florida Statutes, is amended to read:

324.091 Notice to department; notice to insurer.

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(1) Each owner and operator involved in a crash or conviction case within the purview of this chapter shall furnish evidence of automobile liability insurance or motor vehicle liability insurance within 14 days after the date of the mailing of notice of crash by the department in the form and manner as it may designate. Upon receipt of evidence that a an automobile liability policy or motor vehicle liability policy was in effect at the time of the crash or conviction case, the department shall forward to the insurer such information for verification in a method as determined by the department. The insurer shall respond to the department within 20 days after the notice as to whether or not such information is valid. If the department determines that a an automobile liability policy or motor vehicle liability policy was not in effect and did not provide coverage for both the owner and the operator, it must shall take action as it is authorized to do under this chapter.

Section 21. Section 324.151, Florida Statutes, is amended to read:

- 324.151 Motor vehicle liability policies; required provisions.-
- (1) A motor vehicle liability policy that serves as to be proof of financial responsibility under s. 324.031(1) must₇ shall be issued to owners or operators of motor vehicles under the following provisions:
- (a) A motor vehicle An owner's liability insurance policy issued to an owner of a motor vehicle registered in this state must shall designate by explicit description or by appropriate reference all motor vehicles for with respect to which coverage is thereby granted. The policy must and shall insure the person

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or persons owner named therein and any other person as operator using such motor vehicle or motor vehicles with the express or implied permission of such owner against loss from the liability imposed by law for damage arising out of the ownership, maintenance, or use of any such motor vehicle or motor vehicles within the United States or the Dominion of Canada, subject to limits, exclusive of interest and costs with respect to each such motor vehicle as is provided for under s. 324.021(7). Insurers may make available, with respect to property damage liability coverage, a deductible amount not to exceed \$500. In the event of a property damage loss covered by a policy containing a property damage deductible provision, the insurer shall pay to the third-party claimant the amount of any property damage liability settlement or judgment, subject to policy limits, as if no deductible existed.

- (b) An operator's motor vehicle liability policy of insurance must shall insure the person or persons named therein against loss from the liability imposed upon him or her by law for damages arising out of the use by the person of any motor vehicle not owned by him or her, with the same territorial limits and subject to the same limits of liability as referred to above with respect to an owner's policy of liability insurance.
- (c) All such motor vehicle liability policies must shall state the name and address of the named insured, the coverage afforded by the policy, the premium charged therefor, the policy period, the limits of liability, and must shall contain an agreement or be endorsed that insurance is provided in accordance with the coverage defined in this chapter as respects

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bodily injury and death or property damage or both and is subject to all provisions of this chapter. The Said policies must shall also contain a provision that the satisfaction by an insured of a judgment for such injury or damage may shall not be a condition precedent to the right or duty of the insurance carrier to make payment on account of such injury or damage, and must shall also contain a provision that bankruptcy or insolvency of the insured or of the insured's estate may shall not relieve the insurance carrier of any of its obligations under the said policy.

(2) The provisions of This section is shall not be applicable to any automobile liability policy unless and until it is furnished as proof of financial responsibility for the future pursuant to s. 324.031, and then only from and after the date the said policy is so furnished.

Section 22. Section 324.161, Florida Statutes, is amended to read:

324.161 Proof of financial responsibility; deposit.—If a person elects to prove his or her financial responsibility under the method of proof specified in s. 324.031(1)(b), he or she must obtain proof of a certificate of deposit annually, in the amount required under s. 324.031(2), from a financial institution insured by the Federal Deposit Insurance Corporation or the National Credit Union Administration. Proof of such certificate of deposit Annually, before any certificate of insurance may be issued to a person, including any firm, partnership, association, corporation, or other person, other than a natural person, proof of a certificate of deposit of \$30,000 issued and held by a financial institution must be

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submitted to the department annually. A power of attorney will be issued to and held by the department and may be executed upon a judgment issued against such person making the deposit, for damages for because of bodily injury to or death of any person or for damages for because of injury to or destruction of property resulting from the use or operation of any motor vehicle occurring after such deposit was made. Money so deposited is shall not be subject to attachment or execution unless such attachment or execution arises shall arise out of a lawsuit suit for such damages as aforesaid.

Section 23. Subsections (1) and (2) of section 324.171, Florida Statutes, are amended to read:

324.171 Self-insurer.-

- (1) A Any person may qualify as a self-insurer by obtaining a certificate of self-insurance from the department. which may, in its discretion and Upon application of such a person, the department may issue a said certificate of self-insurance if the applicant when such person has satisfied the requirements of this section to qualify as a self-insurer under this section:
- (a) A private individual with private passenger vehicles must shall possess a net unencumbered worth: of
- 1. Beginning January 1, 2019, through December 31, 2020, of at least \$80,000.
- 2. Beginning January 1, 2021, through December 31, 2022, of at least \$100,000.
- 3. Beginning January 1, 2023, and thereafter, of at least \$120,000 \$40,000.
- (b) A person, including any firm, partnership, association, corporation, or other person, other than a natural person, must



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- 1. Possess a net unencumbered worth: of
- a. Beginning January 1, 2019, through December 31, 2020, of at least \$80,000 for the first motor vehicle and \$40,000 for each additional motor vehicle.
- b. Beginning January 1, 2021, through December 31, 2022, of at least \$100,000 for the first motor vehicle and \$50,000 for each additional motor vehicle.
- c. Beginning January 1, 2023, and thereafter, of at least \$120,000 + 40,000 for the first motor vehicle and \$60,000 + 20,000for each additional motor vehicle; or
- 2. Maintain sufficient net worth, in an amount determined by the department, to be financially responsible for potential losses. The department shall annually determine the minimum net worth sufficient to satisfy this subparagraph as determined annually by the department, pursuant to rules adopted $\frac{1}{2}$ promulgated by the department, with the assistance of the Office of Insurance Regulation of the Financial Services Commission, to be financially responsible for potential losses. The rules must consider any shall take into consideration excess insurance carried by the applicant. The department's determination must shall be based upon reasonable actuarial principles considering the frequency, severity, and loss development of claims incurred by casualty insurers writing coverage on the type of motor vehicles for which a certificate of self-insurance is desired.
- (c) The owner of a commercial motor vehicle, as defined in s. 207.002 or s. 320.01, may qualify as a self-insurer subject to the standards provided for in subparagraph (b) 2.
 - (2) The self-insurance certificate must shall provide

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

Section 24. Section 324.251, Florida Statutes, is amended to read:

324.251 Short title.—This chapter may be cited as the "Financial Responsibility Law of 2018 1955" and is shall become effective at 12:01 a.m., January 1, 2019 October 1, 1955.

Section 25. Subsection (4) of section 400.9905, Florida Statutes, is amended to read:

400.9905 Definitions.

- (4) "Clinic" means an entity where health care services are provided to individuals and which tenders charges for reimbursement for such services, including a mobile clinic and a portable equipment provider. As used in this part, the term does not include and the licensure requirements of this part do not apply to:
- (a) Entities licensed or registered by the state under chapter 395; entities licensed or registered by the state and providing only health care services within the scope of services authorized under their respective licenses under ss. 383.30-383.335, chapter 390, chapter 394, chapter 397, this chapter except part X, chapter 429, chapter 463, chapter 465, chapter 466, chapter 478, part I of chapter 483, chapter 484, or chapter 651; end-stage renal disease providers authorized under 42 C.F.R. part 405, subpart U; providers certified under 42 C.F.R. part 485, subpart B or subpart H; or any entity that provides neonatal or pediatric hospital-based health care services or other health care services by licensed practitioners solely

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within a hospital licensed under chapter 395.

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

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- (d) Entities that are under common ownership, directly or indirectly, with an entity licensed or registered by the state pursuant to chapter 395; entities that are under common ownership, directly or indirectly, with an entity licensed or registered by the state and providing only health care services within the scope of services authorized pursuant to their respective licenses under ss. 383.30-383.335, chapter 390, chapter 394, chapter 397, this chapter except part X, chapter 429, chapter 463, chapter 465, chapter 466, chapter 478, part I of chapter 483, chapter 484, or chapter 651; end-stage renal disease providers authorized under 42 C.F.R. part 405, subpart U; providers certified under 42 C.F.R. part 485, subpart B or subpart H; or any entity that provides neonatal or pediatric hospital-based health care services by licensed practitioners solely within a hospital licensed under chapter 395.
- (e) An entity that is exempt from federal taxation under 26 U.S.C. s. 501(c)(3) or (4), an employee stock ownership plan under 26 U.S.C. s. 409 that has a board of trustees at least two-thirds of which are Florida-licensed health care practitioners and provides only physical therapy services under physician orders, any community college or university clinic, and any entity owned or operated by the federal or state government, including agencies, subdivisions, or municipalities thereof.
- (f) A sole proprietorship, group practice, partnership, or corporation that provides health care services by physicians covered by s. 627.419, that is directly supervised by one or more of such physicians, and that is wholly owned by one or more of those physicians or by a physician and the spouse, parent,

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child, or sibling of that physician.

- (g) A sole proprietorship, group practice, partnership, or corporation that provides health care services by licensed health care practitioners under chapter 457, chapter 458, chapter 459, chapter 460, chapter 461, chapter 462, chapter 463, chapter 466, chapter 467, chapter 480, chapter 484, chapter 486, chapter 490, chapter 491, or part I, part III, part X, part XIII, or part XIV of chapter 468, or s. 464.012, and that is wholly owned by one or more licensed health care practitioners, or the licensed health care practitioners set forth in this paragraph and the spouse, parent, child, or sibling of a licensed health care practitioner if one of the owners who is a licensed health care practitioner is supervising the business activities and is legally responsible for the entity's compliance with all federal and state laws. However, a health care practitioner may not supervise services beyond the scope of the practitioner's license, except that, for the purposes of this part, a clinic owned by a licensee in s. 456.053(3)(b) which provides only services authorized pursuant to s. 456.053(3)(b) may be supervised by a licensee specified in s. 456.053(3)(b).
- (h) Clinical facilities affiliated with an accredited medical school at which training is provided for medical students, residents, or fellows.
- (i) Entities that provide only oncology or radiation therapy services by physicians licensed under chapter 458 or chapter 459 or entities that provide oncology or radiation therapy services by physicians licensed under chapter 458 or chapter 459 which are owned by a corporation whose shares are

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publicly traded on a recognized stock exchange.

- (j) Clinical facilities affiliated with a college of chiropractic accredited by the Council on Chiropractic Education at which training is provided for chiropractic students.
- (k) Entities that provide licensed practitioners to staff emergency departments or to deliver anesthesia services in facilities licensed under chapter 395 and that derive at least 90 percent of their gross annual revenues from the provision of such services. Entities claiming an exemption from licensure under this paragraph must provide documentation demonstrating compliance.
- (1) Orthotic, prosthetic, pediatric cardiology, or perinatology clinical facilities or anesthesia clinical facilities that are not otherwise exempt under paragraph (a) or paragraph (k) and that are a publicly traded corporation or are wholly owned, directly or indirectly, by a publicly traded corporation. As used in this paragraph, a publicly traded corporation is a corporation that issues securities traded on an exchange registered with the United States Securities and Exchange Commission as a national securities exchange.
- (m) Entities that are owned by a corporation that has \$250 million or more in total annual sales of health care services provided by licensed health care practitioners where one or more of the persons responsible for the operations of the entity is a health care practitioner who is licensed in this state and who is responsible for supervising the business activities of the entity and is responsible for the entity's compliance with state law for purposes of this part.
 - (n) Entities that employ 50 or more licensed health care



1113 practitioners licensed under chapter 458 or chapter 459 where 1114 the billing for medical services is under a single tax 1115 identification number. The application for exemption under this 1116 subsection must include shall contain information that includes: 1117 the name, residence, and business address and telephone phone 1118 number of the entity that owns the practice; a complete list of the names and contact information of all the officers and 1119 1120 directors of the corporation; the name, residence address, 1121 business address, and medical license number of each licensed 1122 Florida health care practitioner employed by the entity; the 1123 corporate tax identification number of the entity seeking an 1124 exemption; a listing of health care services to be provided by 1125 the entity at the health care clinics owned or operated by the 1126 entity; and a certified statement prepared by an independent 1127 certified public accountant which states that the entity and the 1128 health care clinics owned or operated by the entity have not 1129 received payment for health care services under motor vehicle 1130 personal injury protection insurance coverage for the preceding 1131 year. If the agency determines that an entity that which is 1132 exempt under this subsection has received payments for medical 1133 services under motor vehicle personal injury protection 1134 insurance coverage, the agency may deny or revoke the exemption 1135 from licensure under this subsection. 1137

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Notwithstanding this subsection, an entity shall be deemed a clinic and must be licensed under this part in order to receive reimbursement under a motor vehicle insurance policy the Florida Motor Vehicle No-Fault Law, ss. 627.730-627.7405, unless

exempted under s. 627.736(5)(h). 1141



Section 26. Subsection (6) of section 400.991, Florida Statutes, is amended to read:

400.991 License requirements; background screenings; prohibitions.-

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

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INSURANCE FRAUD NOTICE. - A person commits a fraudulent insurance act, as defined in s. 626.989, Florida Statutes, if the person who knowingly submits a false, misleading, or fraudulent application or other document when applying for licensure as a health care clinic, seeking an exemption from licensure as a health care clinic, or demonstrating compliance with part X of chapter 400, Florida Statutes, with the intent to use the license, exemption from licensure, or demonstration of compliance to provide services or seek reimbursement under a motor vehicle liability insurance policy the Florida Motor Vehicle No-Fault Law, commits a fraudulent insurance act, as defined in s. 626.989, Florida Statutes. A person who presents a claim for benefits under a motor vehicle insurance policy, personal injury protection benefits knowing that the payee knowingly submitted such health care clinic application or document, commits insurance fraud, as defined in s. 817.234, Florida Statutes. Section 27. Paragraph (g) of subsection (1) of section 400.9935, Florida Statutes, is amended to read:

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400.9935 Clinic responsibilities.-

- (1) Each clinic shall appoint a medical director or clinic director who shall agree in writing to accept legal responsibility for the following activities on behalf of the clinic. The medical director or the clinic director shall:
- (g) Conduct systematic reviews of clinic billings to ensure that the billings are not fraudulent or unlawful. Upon discovery of an unlawful charge, the medical director or clinic director shall take immediate corrective action. If the clinic performs only the technical component of magnetic resonance imaging, static radiographs, computed tomography, or positron emission tomography, and provides the professional interpretation of such services, in a fixed facility that is accredited by a national accrediting organization that is approved by the Centers for Medicare and Medicaid Services for magnetic resonance imaging and advanced diagnostic imaging services and if, in the preceding quarter, the percentage of scans performed by that clinic which was billed to motor vehicle all personal injury protection insurance carriers was less than 15 percent, the chief financial officer of the clinic may, in a written acknowledgment provided to the agency, assume the responsibility for the conduct of the systematic reviews of clinic billings to ensure that the billings are not fraudulent or unlawful.

Section 28. Subsection (28) of section 409.901, Florida Statutes, is amended to read:

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

(28) "Third-party benefit" means any benefit that is or may

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

Section 29. Paragraph (f) of subsection (11) of section 409.910, Florida Statutes, is amended to read:

- 409.910 Responsibility for payments on behalf of Medicaideligible persons when other parties are liable.-
- (11) The agency may, as a matter of right, in order to enforce its rights under this section, institute, intervene in, or join any legal or administrative proceeding in its own name in one or more of the following capacities: individually, as subrogee of the recipient, as assignee of the recipient, or as lienholder of the collateral.
- (f) Notwithstanding any provision in this section to the contrary, in the event of an action in tort against a third

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party in which the recipient or his or her legal representative is a party which results in a judgment, award, or settlement from a third party, the amount recovered shall be distributed as follows:

- 1. After attorney attorney's fees and taxable costs as defined by the Florida Rules of Civil Procedure, one-half of the remaining recovery shall be paid to the agency up to the total amount of medical assistance provided by Medicaid.
- 2. The remaining amount of the recovery shall be paid to the recipient.
- 3. For purposes of calculating the agency's recovery of medical assistance benefits paid, the fee for services of an attorney retained by the recipient or his or her legal representative shall be calculated at 25 percent of the judgment, award, or settlement.
- 4. Notwithstanding any other provision of this section to the contrary, the agency shall be entitled to all medical coverage benefits up to the total amount of medical assistance provided by Medicaid. For purposes of this paragraph, the term "medical coverage" means any benefits under health insurance, a health maintenance organization, a preferred provider arrangement, or a prepaid health clinic, and the portion of benefits designated for medical payments under coverage for workers' compensation coverage, motor vehicle insurance coverage, personal injury protection, and casualty coverage.

Section 30. Paragraph (k) of subsection (2) of section 456.057, Florida Statutes, is amended to read:

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

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

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

Section 31. Paragraphs (ee) and (ff) of subsection (1) of section 456.072, Florida Statutes, are amended to read:

456.072 Grounds for discipline; penalties; enforcement.

- (1) The following acts shall constitute grounds for which the disciplinary actions specified in subsection (2) may be taken:
- (ee) With respect to making a motor vehicle insurance personal injury protection claim as required by s. 627.736, intentionally submitting a claim, statement, or bill that has been upcoded. As used in this paragraph, the term "upcoded" means an action that submits a billing code that would result in payment greater in amount than would be paid using a billing code that accurately describes the services performed. The term does not include an otherwise lawful bill by a magnetic resonance imaging facility, which globally combines both technical and professional components, if the amount of the global bill is not more than the components if billed separately; however, payment of such a bill constitutes payment in full for all components of such service "upcoded" as defined in s. 627.732.

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

Section 32. Paragraphs (i) and (o) of subsection (1) of section 626.9541, Florida Statutes, are amended to read:

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

- (1) UNFAIR METHODS OF COMPETITION AND UNFAIR OR DECEPTIVE ACTS.—The following are defined as unfair methods of competition and unfair or deceptive acts or practices:
 - (i) Unfair claim settlement practices.-
- 1. Attempting to settle claims on the basis of an application, when serving as a binder or intended to become a part of the policy, or any other material document which was altered without notice to, or knowledge or consent of, the insured;
- 2. A material misrepresentation made to an insured or any other person having an interest in the proceeds payable under such contract or policy, for the purpose and with the intent of effecting settlement of such claims, loss, or damage under such contract or policy on less favorable terms than those provided in, and contemplated by, such contract or policy; or
- 3. Committing or performing with such frequency as to indicate a general business practice any of the following:
- a. Failing to adopt and implement standards for the proper investigation of claims;
- b. Misrepresenting pertinent facts or insurance policy provisions relating to coverages at issue;

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- 1316 c. Failing to acknowledge and act promptly upon 1317 communications with respect to claims;
 - d. Denying claims without conducting reasonable investigations based upon available information;
 - e. Failing to affirm or deny full or partial coverage of claims, and, as to partial coverage, the dollar amount or extent of coverage, or failing to provide a written statement that the claim is being investigated, upon the written request of the insured within 30 days after proof-of-loss statements have been completed;
 - f. Failing to promptly provide a reasonable explanation in writing to the insured of the basis in the insurance policy, in relation to the facts or applicable law, for denial of a claim or for the offer of a compromise settlement;
 - g. Failing to promptly notify the insured of any additional information necessary for the processing of a claim; or
 - h. Failing to clearly explain the nature of the requested information and the reasons why such information is necessary.
 - i. Failing to pay personal injury protection insurance claims within the time periods required by s. 627.736(4)(b). The office may order the insurer to pay restitution to a policyholder, medical provider, or other claimant, including interest at a rate consistent with the amount set forth in s. 55.03(1), for the time period within which an insurer fails to pay claims as required by law. Restitution is in addition to any other penalties allowed by law, including, but not limited to, the suspension of the insurer's certificate of authority.
 - 4. Failing to pay undisputed amounts of partial or full benefits owed under first-party property insurance policies

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

- (o) Illegal dealings in premiums; excess or reduced charges for insurance.-
- 1. Knowingly collecting any sum as a premium or charge for insurance, which is not then provided, or is not in due course to be provided, subject to acceptance of the risk by the insurer, by an insurance policy issued by an insurer as permitted by this code.
- 2. Knowingly collecting as a premium or charge for insurance any sum in excess of or less than the premium or charge applicable to such insurance, in accordance with the applicable classifications and rates as filed with and approved by the office, and as specified in the policy; or, in cases when classifications, premiums, or rates are not required by this code to be so filed and approved, premiums and charges collected from a Florida resident in excess of or less than those specified in the policy and as fixed by the insurer. Notwithstanding any other provision of law, this provision shall not be deemed to prohibit the charging and collection, by surplus lines agents licensed under part VIII of this chapter, of the amount of applicable state and federal taxes, or fees as authorized by s. 626.916(4), in addition to the premium required

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by the insurer or the charging and collection, by licensed agents, of the exact amount of any discount or other such fee charged by a credit card facility in connection with the use of a credit card, as authorized by subparagraph (q) 3., in addition to the premium required by the insurer. This subparagraph shall not be construed to prohibit collection of a premium for a universal life or a variable or indeterminate value insurance policy made in accordance with the terms of the contract.

- 3.a. Imposing or requesting an additional premium for bodily injury liability coverage, property damage liability coverage a policy of motor vehicle liability, personal injury protection, medical payments coverage payment, or collision coverage in a motor vehicle liability insurance policy insurance or any combination thereof or refusing to renew the policy solely because the insured was involved in a motor vehicle accident unless the insurer's file contains information from which the insurer in good faith determines that the insured was substantially at fault in the accident.
- b. An insurer which imposes and collects such a surcharge or which refuses to renew such policy shall, in conjunction with the notice of premium due or notice of nonrenewal, notify the named insured that he or she is entitled to reimbursement of such amount or renewal of the policy under the conditions listed below and will subsequently reimburse him or her or renew the policy, if the named insured demonstrates that the operator involved in the accident was:
 - (I) Lawfully parked;
- (II) Reimbursed by, or on behalf of, a person responsible for the accident or has a judgment against such person;

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- (III) Struck in the rear by another vehicle headed in the same direction and was not convicted of a moving traffic violation in connection with the accident;
- (IV) Hit by a "hit-and-run" driver, if the accident was reported to the proper authorities within 24 hours after discovering the accident;
- (V) Not convicted of a moving traffic violation in connection with the accident, but the operator of the other automobile involved in such accident was convicted of a moving traffic violation;
- (VI) Finally adjudicated not to be liable by a court of competent jurisdiction;
- (VII) In receipt of a traffic citation which was dismissed or nolle prossed; or
- (VIII) Not at fault as evidenced by a written statement from the insured establishing facts demonstrating lack of fault which are not rebutted by information in the insurer's file from which the insurer in good faith determines that the insured was substantially at fault.
- c. In addition to the other provisions of this subparagraph, an insurer may not fail to renew a policy if the insured has had only one accident in which he or she was at fault within the current 3-year period. However, an insurer may nonrenew a policy for reasons other than accidents in accordance with s. 627.728. This subparagraph does not prohibit nonrenewal of a policy under which the insured has had three or more accidents, regardless of fault, during the most recent 3-year period.
 - 4. Imposing or requesting an additional premium for, or

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1432 refusing to renew, a policy for motor vehicle insurance solely 1433 because the insured committed a noncriminal traffic infraction as described in s. 318.14 unless the infraction is: 1434

- a. A second infraction committed within an 18-month period, or a third or subsequent infraction committed within a 36-month period.
- b. A violation of s. 316.183, when such violation is a result of exceeding the lawful speed limit by more than 15 miles per hour.
- 5. Upon the request of the insured, the insurer and licensed agent shall supply to the insured the complete proof of fault or other criteria which justifies the additional charge or cancellation.
- 6. No insurer shall impose or request an additional premium for motor vehicle insurance, cancel or refuse to issue a policy, or refuse to renew a policy because the insured or the applicant is a handicapped or physically disabled person, so long as such handicap or physical disability does not substantially impair such person's mechanically assisted driving ability.
- 7. No insurer may cancel or otherwise terminate any insurance contract or coverage, or require execution of a consent to rate endorsement, during the stated policy term for the purpose of offering to issue, or issuing, a similar or identical contract or coverage to the same insured with the same exposure at a higher premium rate or continuing an existing contract or coverage with the same exposure at an increased premium.
- 8. No insurer may issue a nonrenewal notice on any insurance contract or coverage, or require execution of a

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consent to rate endorsement, for the purpose of offering to issue, or issuing, a similar or identical contract or coverage to the same insured at a higher premium rate or continuing an existing contract or coverage at an increased premium without meeting any applicable notice requirements.

- 9. No insurer shall, with respect to premiums charged for motor vehicle insurance, unfairly discriminate solely on the basis of age, sex, marital status, or scholastic achievement.
- 10. Imposing or requesting an additional premium for motor vehicle comprehensive or uninsured motorist coverage solely because the insured was involved in a motor vehicle accident or was convicted of a moving traffic violation.
- 11. No insurer shall cancel or issue a nonrenewal notice on any insurance policy or contract without complying with any applicable cancellation or nonrenewal provision required under the Florida Insurance Code.
- 12. No insurer shall impose or request an additional premium, cancel a policy, or issue a nonrenewal notice on any insurance policy or contract because of any traffic infraction when adjudication has been withheld and no points have been assessed pursuant to s. 318.14(9) and (10). However, this subparagraph does not apply to traffic infractions involving accidents in which the insurer has incurred a loss due to the fault of the insured.

Section 33. Paragraph (a) of subsection (1) of section 626.989, Florida Statutes, is amended to read:

626.989 Investigation by department or Division of Investigative and Forensic Services; compliance; immunity; confidential information; reports to division; division

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investigator's power of arrest.-

- (1) For the purposes of this section:
- (a) A person commits a "fraudulent insurance act" if the person:
- 1. Knowingly and with intent to defraud presents, causes to be presented, or prepares with knowledge or belief that it will be presented, to or by an insurer, self-insurer, self-insurance fund, servicing corporation, purported insurer, broker, or any agent thereof, any written statement as part of, or in support of, an application for the issuance of, or the rating of, any insurance policy, or a claim for payment or other benefit pursuant to any insurance policy, which the person knows to contain materially false information concerning any fact material thereto or if the person conceals, for the purpose of misleading another, information concerning any fact material thereto.
 - 2. Knowingly submits:
- a. A false, misleading, or fraudulent application or other document when applying for licensure as a health care clinic, seeking an exemption from licensure as a health care clinic, or demonstrating compliance with part X of chapter 400 with an intent to use the license, exemption from licensure, or demonstration of compliance to provide services or seek reimbursement under a motor vehicle liability insurance policy the Florida Motor Vehicle No-Fault Law.
- b. A claim for payment or other benefit under a motor vehicle pursuant to a personal injury protection insurance policy under the Florida Motor Vehicle No-Fault Law if the person knows that the payee knowingly submitted a false,

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misleading, or fraudulent application or other document when applying for licensure as a health care clinic, seeking an exemption from licensure as a health care clinic, or demonstrating compliance with part X of chapter 400.

Section 34. Subsection (1) of section 627.06501, Florida Statutes, is amended to read:

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

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

Section 35. Subsection (1) of section 627.0652, Florida Statutes, is amended to read:

627.0652 Insurance discounts for certain persons completing safety course.-

(1) Any rates, rating schedules, or rating manuals for the bodily injury and property damage liability coverage, personal injury protection, and collision coverages of a motor vehicle insurance policy filed with the office must shall provide for an appropriate reduction in premium charges as to such coverages if

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when the principal operator on the covered vehicle is an insured 55 years of age or older who has successfully completed a motor vehicle accident prevention course approved by the Department of Highway Safety and Motor Vehicles. Any discount used by an insurer is presumed to be appropriate unless credible data demonstrates otherwise.

Section 36. Subsections (1), (3), and (6) of section 627.0653, Florida Statutes, are amended to read:

627.0653 Insurance discounts for specified motor vehicle equipment.-

- (1) Any rates, rating schedules, or rating manuals for the bodily injury and property damage liability coverage, personal injury protection, and collision coverages of a motor vehicle insurance policy filed with the office must shall provide a premium discount if the insured vehicle is equipped with factory-installed, four-wheel antilock brakes.
- (3) Any rates, rating schedules, or rating manuals for the bodily injury liability personal injury protection coverage and medical payments coverage, if offered, of a motor vehicle insurance policy filed with the office must shall provide a premium discount if the insured vehicle is equipped with one or more air bags that which are factory installed.
- (6) The Office of Insurance Regulation may approve a premium discount to any rates, rating schedules, or rating manuals for the bodily injury and property damage liability coverage, personal injury protection, and collision coverages of a motor vehicle insurance policy filed with the office if the insured vehicle is equipped with autonomous driving technology or electronic vehicle collision avoidance technology that is

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factory installed or a retrofitted system and that complies with National Highway Traffic Safety Administration standards.

Section 37. Section 627.4132, Florida Statutes, is amended to read:

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

- (1) To uninsured motorist coverage that which is separately governed by s. 627.727.
- (2) To reduce the coverage available by reason of insurance policies insuring different named insureds.

Section 38. Section 627.7263, Florida Statutes, is amended to read:

- 627.7263 Rental and leasing driver's insurance to be primary; exception.-
- (1) The valid and collectible bodily injury and property damage liability insurance or personal injury protection insurance providing coverage for the lessor of a motor vehicle for rent or lease is primary unless otherwise stated in at least 10-point type on the face of the rental or lease agreement. Such



insurance is primary for the limits of liability and personal injury protection coverage as required by s. 324.021(7) ss. 324.021(7) and 627.736.

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

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

Section 39. Subsections (1) and (7) of section 627.727, Florida Statutes, are amended, and present subsections (8), (9), and (10) of that section are redesignated as subsections (7), (8), and (9), respectively, to read:

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

(1) A No motor vehicle liability insurance policy that which provides bodily injury liability coverage may not shall be delivered or issued for delivery in this state with respect to any specifically insured or identified motor vehicle registered or principally garaged in this state, unless uninsured motor vehicle coverage is provided therein or supplemental thereto for the protection of persons insured thereunder who are legally entitled to recover damages from owners or operators of uninsured motor vehicles because of bodily injury, sickness, or

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disease, including death, resulting therefrom. However, the coverage required under this section is not applicable if when, or to the extent that, an insured named in the policy makes a written rejection of the coverage on behalf of all insureds under the policy. If When a motor vehicle is leased for a period of 1 year or longer and the lessor of such vehicle, by the terms of the lease contract, provides liability coverage on the leased vehicle, the lessee of such vehicle has shall have the sole privilege to reject uninsured motorist coverage or to select lower limits than the bodily injury liability limits, regardless of whether the lessor is qualified as a self-insurer pursuant to s. 324.171. Unless an insured, or lessee having the privilege of rejecting uninsured motorist coverage, requests such coverage or requests higher uninsured motorist limits in writing, the coverage or such higher uninsured motorist limits need not be provided in or supplemental to any other policy which renews, extends, changes, supersedes, or replaces an existing policy with the same bodily injury liability limits when an insured or lessee had rejected the coverage. When an insured or lessee has initially selected limits of uninsured motorist coverage lower than her or his bodily injury liability limits, higher limits of uninsured motorist coverage need not be provided in or supplemental to any other policy that which renews, extends, changes, supersedes, or replaces an existing policy with the same bodily injury liability limits unless an insured requests higher uninsured motorist coverage in writing. The rejection or selection of lower limits must shall be made on a form approved by the office. The form must shall fully advise the applicant of the nature of the coverage and must shall state that the

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coverage is equal to bodily injury liability limits unless lower limits are requested or the coverage is rejected. The heading of the form must shall be in 12-point bold type and must shall state: "You are electing not to purchase certain valuable coverage that which protects you and your family or you are purchasing uninsured motorist limits less than your bodily injury liability limits when you sign this form. Please read carefully." If this form is signed by a named insured, it will be conclusively presumed that there was an informed, knowing rejection of coverage or election of lower limits on behalf of all insureds. The insurer shall notify the named insured at least annually of her or his options as to the coverage required by this section. Such notice must shall be part of, and attached to, the notice of premium, must shall provide for a means to allow the insured to request such coverage, and must shall be given in a manner approved by the office. Receipt of this notice does not constitute an affirmative waiver of the insured's right to uninsured motorist coverage if where the insured has not signed a selection or rejection form. The coverage described under this section must shall be over and above, but may shall not duplicate, the benefits available to an insured under any workers' compensation law, personal injury protection benefits, disability benefits law, or similar law; under any automobile medical payments expense coverage; under any motor vehicle liability insurance coverage; or from the owner or operator of the uninsured motor vehicle or any other person or organization jointly or severally liable together with such owner or operator for the accident; and such coverage must shall cover the difference, if any, between the sum of such benefits and the

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damages sustained, up to the maximum amount of such coverage provided under this section. The amount of coverage available under this section may shall not be reduced by a setoff against any coverage, including liability insurance. Such coverage does shall not inure directly or indirectly to the benefit of any workers' compensation or disability benefits carrier or any person or organization qualifying as a self-insurer under any workers' compensation or disability benefits law or similar law.

(7) The legal liability of an uninsured motorist coverage insurer does not include damages in tort for pain, suffering, mental anguish, and inconvenience unless the injury or disease is described in one or more of paragraphs (a) - (d) of s. 627.737(2).

Section 40. Section 627.7275, Florida Statutes, is amended to read:

627.7275 Motor vehicle liability; bad faith actions; insurer liability; requirements and construction.-

- (1) A motor vehicle insurance policy providing personal injury protection as set forth in s. 627.736 may not be delivered or issued for delivery in this state for a with respect to any specifically insured or identified motor vehicle registered or principally garaged in this state must provide bodily injury liability coverage and unless the policy also provides coverage for property damage liability coverage as required under by s. 324.022.
- (2)(a) Insurers writing motor vehicle insurance in this state shall make available, subject to the insurers' usual underwriting restrictions:
 - 1. Coverage under policies as described in subsection (1)

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to an applicant for private passenger motor vehicle insurance coverage who is seeking the coverage in order to reinstate the applicant's driving privileges in this state if the driving privileges were revoked or suspended pursuant to s. 316.646 or s. 324.0221 due to the failure of the applicant to maintain required security.

- 2. Coverage under policies as described in subsection (1), which includes bodily injury also provides liability coverage and property damage liability coverage for bodily injury, death, and property damage arising out of the ownership, maintenance, or use of the motor vehicle in an amount not less than the minimum limits required under described in s. 324.021(7) or s. 324.023 and which conforms to the requirements of s. 324.151, to an applicant for private passenger motor vehicle insurance coverage who is seeking the coverage in order to reinstate the applicant's driving privileges in this state after such privileges were revoked or suspended under s. 316.193 or s. 322.26(2) for driving under the influence.
- (b) The policies described in paragraph (a) must shall be issued for at least 6 months and, as to the minimum coverages required under this section, may not be canceled by the insured for any reason or by the insurer after 60 days, during which period the insurer is completing the underwriting of the policy. After the insurer has completed underwriting the policy, the insurer shall notify the Department of Highway Safety and Motor Vehicles that the policy is in full force and effect and is not cancelable for the remainder of the policy period. A premium must shall be collected and the coverage is in effect for the 60-day period during which the insurer is completing the

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underwriting of the policy, whether or not the person's driver license, motor vehicle tag, and motor vehicle registration are in effect. Once the noncancelable provisions of the policy become effective, the bodily injury liability and property damage liability coverages for bodily injury, property damage, and personal injury protection may not be reduced below the minimum limits required under s. 324.021 or s. 324.023 during the policy period.

- (c) This subsection controls to the extent of any conflict with any other section.
- (d) An insurer issuing a policy subject to this section may cancel the policy if, during the policy term, the named insured, or any other operator who resides in the same household or customarily operates an automobile insured under the policy, has his or her driver license suspended or revoked.
- (e) This subsection does not require an insurer to offer a policy of insurance to an applicant if such offer would be inconsistent with the insurer's underwriting guidelines and procedures.
- (3) (a) As a condition precedent to a statutory or common law action for a bad faith failure to settle a motor vehicle liability claim, the insured, claimant, or the representative of the insured or claimant must provide the insurer with a written notice of loss. If the motor vehicle liability insurer complies with a request for a disclosure statement described in s. 627.4137, and, within 45 days after receipt of the written notice of loss, offers to pay the claimant the lesser of the amount the claimant is willing to accept or the limits of the motor vehicle liability coverage applicable to the claimant's

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claim in exchange for full release of the insureds from any liability arising from the incident and the notice of loss, the insurer does not violate the duty to attempt in good faith to settle the claim and is not liable for a bad faith failure to settle under this section or under the common law.

- (b) In evaluating whether the insurer attempted in good faith to settle the claim when, under the totality of the circumstances, it could have and should have done so had it acted fairly and honestly toward its insured and with due regard for his or her interests, the trier of fact must also consider whether the insured, claimant, or representative of the insured or claimant made good faith efforts to cooperate with the insurer in the investigation of the claim.
- (c) If two or more third-party claimants in a motor vehicle liability claim make competing claims arising out of a single occurrence which in total exceed the available policy limits of one or more of the insured parties who may be liable to the third-party claimants, an insurer is not liable beyond the available policy limits for failure to pay all or any portion of the available policy limits to one or more of the third-party claimants, if, within 90 days after receiving notice of the competing claims in excess of the available policy limits, the insurer files an interpleader action under the Florida Rules of Civil Procedure. The claims of the competing third-party claimants are entitled to a prorated share of the policy limits as determined by the trier of fact. An insurer's interpleader action does not alter or amend the insurer's obligation to defend its insured.

Section 41. Paragraph (a) of subsection (1) of section



1809 627.728, Florida Statutes, is amended to read: 1810 627.728 Cancellations; nonrenewals.-(1) As used in this section, the term: 1811

- (a) "Policy" means the bodily injury and property damage liability, personal injury protection, medical payments, comprehensive, collision, and uninsured motorist coverage portions of a policy of motor vehicle insurance delivered or issued for delivery in this state:
- 1. Insuring a natural person as named insured or one or more related individuals who are residents resident of the same household; and
- 2. Insuring only a motor vehicle of the private passenger type or station wagon type which is not used as a public or livery conveyance for passengers or rented to others; or insuring any other four-wheel motor vehicle having a load capacity of 1,500 pounds or less which is not used in the occupation, profession, or business of the insured other than farming; other than any policy issued under an automobile insurance assigned risk plan or covering garage, automobile sales agency, repair shop, service station, or public parking place operation hazards.

1830 1831 The term "policy" does not include a binder as defined in s. 1832

627.420 unless the duration of the binder period exceeds 60

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Section 42. Subsection (1), paragraph (a) of subsection (5), and subsections (6) and (7) of section 627.7295, Florida Statutes, are amended to read:

627.7295 Motor vehicle insurance contracts.-

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- 1838 (1) As used in this section, the term:
 - (a) "Policy" means a motor vehicle insurance policy that provides bodily injury liability personal injury protection coverage, property damage liability coverage, or both.
 - (b) "Binder" means a binder that provides motor vehicle bodily injury liability coverage, personal injury protection and property damage liability coverage.
 - (5)(a) A licensed general lines agent may charge a perpolicy fee up to not to exceed \$10 to cover the administrative costs of the agent associated with selling the motor vehicle insurance policy if the policy covers only bodily injury liability coverage personal injury protection coverage as provided by s. 627.736 and property damage liability coverage as provided by s. 627.7275 and if no other insurance is sold or issued in conjunction with or collateral to the policy. The fee is not considered part of the premium.
 - (6) If a motor vehicle owner's driver license, license plate, and registration have previously been suspended pursuant to s. 316.646 or s. 627.733, an insurer may cancel a new policy only as provided in s. 627.7275.
 - (7) A policy of private passenger motor vehicle insurance or a binder for such a policy may be initially issued in this state only if, before the effective date of such binder or policy, the insurer or agent has collected from the insured an amount equal to 2 months' premium from the insured. An insurer, agent, or premium finance company may not, directly or indirectly, take any action that results resulting in the insured paying having paid from the insured's own funds an amount less than the 2 months' premium required by this

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subsection. This subsection applies without regard to whether the premium is financed by a premium finance company or is paid pursuant to a periodic payment plan of an insurer or an insurance agent.

- (a) This subsection does not apply:
- 1. If an insured or member of the insured's family is renewing or replacing a policy or a binder for such policy written by the same insurer or a member of the same insurer group. This subsection does not apply
- 2. To an insurer that issues private passenger motor vehicle coverage primarily to active duty or former military personnel or their dependents. This subsection does not apply
- 3. If all policy payments are paid pursuant to a payroll deduction plan, an automatic electronic funds transfer payment plan from the policyholder, or a recurring credit card or debit card agreement with the insurer.
 - (b) This subsection and subsection (4) do not apply if:
- 1. All policy payments to an insurer are paid pursuant to an automatic electronic funds transfer payment plan from an agent, a managing general agent, or a premium finance company and if the policy includes, at a minimum, bodily injury liability coverage and personal injury protection pursuant to ss. 627.730-627.7405; motor vehicle property damage liability coverage pursuant to s. 627.7275; or and bodily injury liability in at least the amount of \$10,000 because of bodily injury to, or death of, one person in any one accident and in the amount of \$20,000 because of bodily injury to, or death of, two or more persons in any one accident. This subsection and subsection (4) do not apply if

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2. An insured has had a policy in effect for at least 6 months, the insured's agent is terminated by the insurer that issued the policy, and the insured obtains coverage on the policy's renewal date with a new company through the terminated agent.

Section 43. Subsections (1) and (2) of section 627.7415, Florida Statutes, are amended to read:

- 627.7415 Commercial motor vehicles; additional liability insurance coverage. - Commercial motor vehicles, as defined in s. 207.002 or s. 320.01, operated upon the roads and highways of this state shall be insured with the following minimum levels of combined bodily liability insurance and property damage liability insurance under subsections (1) and (2) in addition to any other insurance requirements. +
- (1) Fifty thousand dollars per occurrence For a commercial motor vehicle with a gross vehicle weight of 26,000 pounds or more, but less than 35,000 pounds:
- (a) Beginning January 1, 2019, through December 31, 2020, no less than \$50,000 per occurrence.
- (b) Beginning January 1, 2021, through December 31, 2022, no less than \$60,000 per occurrence.
- (c) Beginning January 1, 2023, and thereafter, no less than \$70,000 per occurrence.
- (2) One hundred thousand dollars per occurrence For a commercial motor vehicle with a gross vehicle weight of 35,000 pounds or more, but less than 44,000 pounds:
- (a) Beginning January 1, 2019, through December 31, 2020, no less than \$100,000 per occurrence.
 - (b) Beginning January 1, 2021, through December 31, 2022,



no less than \$120,000 per occurrence.

(c) Beginning January 1, 2023, and thereafter, no less than \$140,000 per occurrence.

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> A violation of this section is a noncriminal traffic infraction, punishable as a nonmoving violation as provided in chapter 318.

> Section 44. Section 627.8405, Florida Statutes, is amended to read:

- 627.8405 Prohibited acts; financing companies.—A No premium finance company shall, in a premium finance agreement or other agreement, may not finance the cost of or otherwise provide for the collection or remittance of dues, assessments, fees, or other periodic payments of money for the cost of:
- (1) A membership in an automobile club. The term "automobile club" means a legal entity that which, in consideration of dues, assessments, or periodic payments of money, promises its members or subscribers to assist them in matters relating to the ownership, operation, use, or maintenance of a motor vehicle; however, the term this definition of "automobile club" does not include persons, associations, or corporations which are organized and operated solely for the purpose of conducting, sponsoring, or sanctioning motor vehicle races, exhibitions, or contests upon racetracks, or upon racecourses established and marked as such for the duration of such particular events. The term words "motor vehicle" used herein has have the same meaning as defined in chapter 320.
- (2) An accidental death and dismemberment policy sold in combination with a policy providing only bodily injury liability

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coverage personal injury protection and property damage liability coverage only policy.

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

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

Section 45. Subsection (1) of section 627.915, Florida Statutes, is amended to read:

627.915 Insurer experience reporting.

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



1983 basis ultimately seven times at seven different stages of 1984 development. (a) Premiums earned for the latest 3 calendar-accident 1985 1986 years. 1987 (b) Loss development factors and the historic development 1988 of those factors. 1989 (c) Policyholder dividends incurred. 1990 (d) Expenses for other acquisition and general expense. 1991 (e) Expenses for agents' commissions and taxes, licenses, 1992 and fees. 1993 (f) Profit and contingency factors as utilized in the 1994 insurer's automobile rate filings for the applicable years. 1995 (q) Losses paid. 1996 (h) Losses unpaid. 1997 (i) Loss adjustment expenses paid. 1998 (j) Loss adjustment expenses unpaid. 1999 Section 46. Subsections (2) and (3) of section 628.909, 2000 Florida Statutes, are amended to read: 2001 628.909 Applicability of other laws.-(2) The following provisions of the Florida Insurance Code 2002 2003 apply to captive insurance companies who are not industrial 2004 insured captive insurance companies to the extent that such 2005 provisions are not inconsistent with this part: (a) Chapter 624, except for ss. 624.407, 624.408, 624.4085, 2006

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

624.40851, 624.4095, 624.411, 624.425, and 624.426.

(b) Chapter 625, part II.

(c) Chapter 626, part IX.

provided.

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(e) Chapter 628.

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- (3) The following provisions of the Florida Insurance Code shall apply to industrial insured captive insurance companies to the extent that such provisions are not inconsistent with this part:
- (a) Chapter 624, except for ss. 624.407, 624.408, 624.4085, 624.40851, 624.4095, 624.411, 624.425, 624.426, and 624.609(1).
- (b) Chapter 625, part II, if the industrial insured captive insurance company is incorporated in this state.
 - (c) Chapter 626, part IX.
- (d) Sections 627.730-627.7405 when no-fault coverage is provided.
- (e) Chapter 628, except for ss. 628.341, 628.351, and 628.6018.
- Section 47. Subsections (2), (6), and (7) of section 705.184, Florida Statutes, are amended to read:
- 705.184 Derelict or abandoned motor vehicles on the premises of public-use airports.-
- (2) The airport director or the director's designee shall contact the Department of Highway Safety and Motor Vehicles to notify that department that the airport has possession of the abandoned or derelict motor vehicle and to determine the name and address of the owner of the motor vehicle, the insurance company insuring the motor vehicle, notwithstanding the provisions of s. 627.736, and any person who has filed a lien on the motor vehicle. Within 7 business days after receipt of the information, the director or the director's designee shall send notice by certified mail, return receipt requested, to the owner of the motor vehicle, the insurance company insuring the motor

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vehicle, notwithstanding the provisions of s. 627.736, and all persons of record claiming a lien against the motor vehicle. The notice must shall state the fact of possession of the motor vehicle, that charges for reasonable towing, storage, and parking fees, if any, have accrued and the amount thereof, that a lien as provided in subsection (6) will be claimed, that the lien is subject to enforcement pursuant to law, that the owner or lienholder, if any, has the right to a hearing as set forth in subsection (4), and that any motor vehicle which, at the end of 30 calendar days after receipt of the notice, has not been removed from the airport upon payment in full of all accrued charges for reasonable towing, storage, and parking fees, if any, may be disposed of as provided in s. 705.182(2)(a), (b), (d), or (e), including, but not limited to, the motor vehicle being sold free of all prior liens after 35 calendar days after the time the motor vehicle is stored if any prior liens on the motor vehicle are more than 5 years of age or after 50 calendar days after the time the motor vehicle is stored if any prior liens on the motor vehicle are 5 years of age or less.

(6) The airport pursuant to this section or, if used, a licensed independent wrecker company pursuant to s. 713.78 shall have a lien on an abandoned or derelict motor vehicle for all reasonable towing, storage, and accrued parking fees, if any, except that no storage fee may shall be charged if the motor vehicle is stored less than 6 hours. As a prerequisite to perfecting a lien under this section, the airport director or the director's designee must serve a notice in accordance with subsection (2) on the owner of the motor vehicle, the insurance company insuring the motor vehicle, notwithstanding the

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provisions of s. 627.736, and all persons of record claiming a lien against the motor vehicle. If attempts to notify the owner, the insurance company insuring the motor vehicle, notwithstanding the provisions of s. 627.736, or lienholders are not successful, the requirement of notice by mail shall be considered met. Serving of the notice does not dispense with recording the claim of lien.

- (7) (a) For the purpose of perfecting its lien under this section, the airport shall record a claim of lien which states shall state:
 - 1. The name and address of the airport.
- 2. The name of the owner of the motor vehicle, the insurance company insuring the motor vehicle, notwithstanding the provisions of s. 627.736, and all persons of record claiming a lien against the motor vehicle.
- 3. The costs incurred from reasonable towing, storage, and parking fees, if any.
- 4. A description of the motor vehicle sufficient for identification.
- (b) The claim of lien must shall be signed and sworn to or affirmed by the airport director or the director's designee.
- (c) The claim of lien is shall be sufficient if it is in substantially the following form:

2094 CLAIM OF LIEN

2095 State of

2096 County of

2097 Before me, the undersigned notary public, personally appeared 2098, who was duly sworn and says that he/she is the



2099 of, whose address is....; and that the

2100	following described motor vehicle:
2101	(Description of motor vehicle)
2102	owned by, whose address is, has accrued
2103	\$ in fees for a reasonable tow, for storage, and for
2104	parking, if applicable; that the lienor served its notice to the
2105	owner, the insurance company insuring the motor vehicle
2106	notwithstanding the provisions of s. 627.736, Florida Statutes,
2107	and all persons of record claiming a lien against the motor
2108	vehicle on,(year), by
2109	(Signature)
2110	Sworn to (or affirmed) and subscribed before me this day of
2111	,(year), by(name of person making statement)
2112	(Signature of Notary Public)(Print, Type, or Stamp
2113	Commissioned name of Notary Public)
2114	Personally KnownOR Producedas identification.
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2116	However, the negligent inclusion or omission of any information
2117	in this claim of lien which does not prejudice the owner does
2118	not constitute a default that operates to defeat an otherwise
2119	valid lien.
2120	(d) The claim of lien <u>must</u> shall be served on the owner of
2121	the motor vehicle, the insurance company insuring the motor
2122	vehicle, notwithstanding the provisions of s. 627.736, and all
2123	persons of record claiming a lien against the motor vehicle. If
2124	attempts to notify the owner, the insurance company insuring the
2125	motor vehicle notwithstanding the provisions of s. 627.736 , or
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	lienholders are not successful, the requirement of notice by
2127	mail shall be considered met. The claim of lien <u>must</u> shall be so



served before recordation.

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(e) The claim of lien must shall be recorded with the clerk of court in the county where the airport is located. The recording of the claim of lien shall be constructive notice to all persons of the contents and effect of such claim. The lien attaches shall attach at the time of recordation and takes shall take priority as of that time.

Section 48. Subsection (4) of section 713.78, Florida Statutes, is amended to read:

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

- (4) (a) Any person regularly engaged in the business of recovering, towing, or storing vehicles or vessels who comes into possession of a vehicle or vessel pursuant to subsection (2), and who claims a lien for recovery, towing, or storage services, shall give notice to the registered owner, the insurance company insuring the vehicle notwithstanding the provisions of s. 627.736, and to all persons claiming a lien thereon, as disclosed by the records in the Department of Highway Safety and Motor Vehicles or as disclosed by the records of any corresponding agency in any other state in which the vehicle is identified through a records check of the National Motor Vehicle Title Information System or an equivalent commercially available system as being titled or registered.
- (b) If a Whenever any law enforcement agency authorizes the removal of a vehicle or vessel or if a whenever any towing service, garage, repair shop, or automotive service, storage, or parking place notifies the law enforcement agency of possession of a vehicle or vessel pursuant to s. 715.07(2)(a)2., the law

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

(c) Notice by certified mail must shall be sent within 7 business days after the date of storage of the vehicle or vessel to the registered owner, the insurance company insuring the vehicle notwithstanding the provisions of s. 627.736, and all persons of record claiming a lien against the vehicle or vessel. The notice must It shall state the fact of possession of the vehicle or vessel, that a lien as provided in subsection (2) is claimed, that charges have accrued and the amount thereof, that the lien is subject to enforcement pursuant to law, and that the owner or lienholder, if any, has the right to a hearing as set forth in subsection (5), and that any vehicle or vessel which

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remains unclaimed, or for which the charges for recovery, towing, or storage services remain unpaid, may be sold free of all prior liens after 35 days if the vehicle or vessel is more than 3 years of age or after 50 days if the vehicle or vessel is 3 years of age or less.

- (d) If attempts to locate the name and address of the owner or lienholder prove unsuccessful, the towing-storage operator must shall, after 7 working days, excluding Saturday and Sunday, of the initial tow or storage, notify the public agency of jurisdiction where the vehicle or vessel is stored in writing by certified mail or acknowledged hand delivery that the towingstorage company has been unable to locate the name and address of the owner or lienholder and a physical search of the vehicle or vessel has disclosed no ownership information and a good faith effort has been made, including records checks of the Department of Highway Safety and Motor Vehicles database and the National Motor Vehicle Title Information System or an equivalent commercially available system. As used in For purposes of this paragraph and subsection (9), the term "good faith effort" means that the following checks have been performed by the company to establish prior state of registration and for title:
- 1. Check of the Department of Highway Safety and Motor Vehicles database for the owner and any lienholder.
- 2. Check of the electronic National Motor Vehicle Title Information System or an equivalent commercially available system to determine the state of registration when there is not a current registration record for the vehicle on file with the Department of Highway Safety and Motor Vehicles.
 - 3. Check of vehicle or vessel for any type of tag, tag

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2215 record, temporary tag, or regular tag.

- 4. Check of law enforcement report for tag number or other information identifying the vehicle or vessel, if the vehicle or vessel was towed at the request of a law enforcement officer.
- 5. Check of trip sheet or tow ticket of tow truck operator to see if a tag was on vehicle or vessel at beginning of tow, if private tow.
- 6. If there is no address of the owner on the impound report, check of law enforcement report to see if an out-ofstate address is indicated from driver license information.
- 7. Check of vehicle or vessel for inspection sticker or other stickers and decals that may indicate a state of possible registration.
- 8. Check of the interior of the vehicle or vessel for any papers that may be in the glove box, trunk, or other areas for a state of registration.
 - 9. Check of vehicle for vehicle identification number.
 - 10. Check of vessel for vessel registration number.
- 11. Check of vessel hull for a hull identification number which should be carved, burned, stamped, embossed, or otherwise permanently affixed to the outboard side of the transom or, if there is no transom, to the outmost seaboard side at the end of the hull that bears the rudder or other steering mechanism.

Section 49. Paragraph (a) of subsection (1), paragraph (c) of subsection (7), paragraphs (a), (b), and (c) of subsection (8), and subsections (9) and (10) of section 817.234, Florida Statutes, are amended to read:

- 817.234 False and fraudulent insurance claims.-
- (1)(a) A person commits insurance fraud punishable as

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provided in subsection (11) if that person, with the intent to injure, defraud, or deceive any insurer:

- 1. Presents or causes to be presented any written or oral statement as part of, or in support of, a claim for payment or other benefit pursuant to an insurance policy or a health maintenance organization subscriber or provider contract, knowing that such statement contains any false, incomplete, or misleading information concerning any fact or thing material to such claim;
- 2. Prepares or makes any written or oral statement that is intended to be presented to an any insurer in connection with, or in support of, any claim for payment or other benefit pursuant to an insurance policy or a health maintenance organization subscriber or provider contract, knowing that such statement contains any false, incomplete, or misleading information concerning any fact or thing material to such claim;
- 3.a. Knowingly presents, causes to be presented, or prepares or makes with knowledge or belief that it will be presented to an any insurer, purported insurer, servicing corporation, insurance broker, or insurance agent, or any employee or agent thereof, any false, incomplete, or misleading information or a written or oral statement as part of, or in support of, an application for the issuance of, or the rating of, any insurance policy, or a health maintenance organization subscriber or provider contract; or
- b. Knowingly conceals information concerning any fact material to such application; or
- 4. Knowingly presents, causes to be presented, or prepares or makes with knowledge or belief that it will be presented to



any insurer a claim for payment or other benefit under a motor vehicle a personal injury protection insurance policy if the person knows that the payee knowingly submitted a false, misleading, or fraudulent application or other document when applying for licensure as a health care clinic, seeking an exemption from licensure as a health care clinic, or demonstrating compliance with part X of chapter 400.

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- (c) An insurer, or any person acting at the direction of or on behalf of an insurer, may not change an opinion in a mental or physical report prepared under s. 627.736(7) or direct the physician preparing the report to change such opinion; however, this provision does not preclude the insurer from calling to the attention of the physician errors of fact in the report based upon information in the claim file. Any person who violates this paragraph commits a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.
- (8)(a) It is unlawful for any person intending to defraud any other person to solicit or cause to be solicited any business from a person involved in a motor vehicle accident for the purpose of making, adjusting, or settling motor vehicle tort claims or claims for benefits under a motor vehicle insurance policy personal injury protection benefits required by s. 627.736. Any person who violates the provisions of this paragraph commits a felony of the second degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084. A person who is convicted of a violation of this subsection shall be sentenced to a minimum term of imprisonment of 2 years.
 - (b) A person may not solicit or cause to be solicited any

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business from a person involved in a motor vehicle accident by any means of communication other than advertising directed to the public for the purpose of making motor vehicle tort claims or claims for benefits under a motor vehicle insurance policy personal injury protection benefits required by s. 627.736, within 60 days after the occurrence of the motor vehicle accident. Any person who violates this paragraph commits a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.

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

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2331 775.084. A person who is convicted of a violation of this 2332 subsection shall be sentenced to a minimum term of imprisonment of 2 years. 2333

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

Section 50. Applicability and construction; notice to policyholders.-

- (1) As used in this section, the term "minimum security requirements" means security that enables a person to respond in damages for liability on account of crashes arising out of the ownership, maintenance, or use of a motor vehicle in the amounts required by s. 324.021(7), Florida Statutes.
 - (2) Effective January 1, 2019:
- (a) Motor vehicle insurance policies issued or renewed on or after that date may not include personal injury protection.
- (b) All persons subject to s. 324.022, s. 324.032, s. 627.7415, or s. 627.742, Florida Statutes, must maintain at least minimum security requirements.
- (c) Any new or renewal motor vehicle insurance policy delivered or issued for delivery in this state must provide coverage that complies with minimum security requirements.
- (d) An existing motor vehicle insurance policy issued before that date which provides personal injury protection and property damage liability coverage that meets the requirements of s. 324.022, Florida Statutes, on December 31, 2018, but which

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does not meet minimum security requirements on or after January 1, 2019, is deemed to meet the security requirements of s. 324.022, Florida Statutes, until such policy is renewed, nonrenewed, or canceled on or after January 1, 2019. (3) Each insurer shall allow each insured who has a new or renewal policy providing personal injury protection, which becomes effective before January 1, 2019, and whose policy does not meet minimum security requirements on or after January 1, 2019, to change coverages so as to eliminate personal injury protection and obtain coverage providing minimum security requirements, which shall be effective on or after January 1, 2019. The insurer is not required to provide coverage complying with minimum security requirements in such policies if the insured does not pay the required premium, if any, by January 1, 2019, or such later date as the insurer may allow. Any reduction in the premium must be refunded by the insurer. The insurer may not impose on the insured an additional fee or charge that applies solely to a change in coverage; however, the insurer may charge an additional required premium that is actuarially indicated. (4) By September 1, 2018, each motor vehicle insurer shall provide notice of this section to each motor vehicle policyholder who is subject to this section. The notice is subject to approval by the Office of Insurance Regulation and must clearly inform the policyholder that:

(a) The Florida Motor Vehicle No-Fault Law is repealed, effective January 1, 2019, and that on or after that date, the insured is no longer required to maintain personal injury protection insurance coverage, that personal injury protection

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2389 coverage is no longer available for purchase in this state, and 2390 that all new or renewal policies issued on or after that date do 2391 not contain such coverage.

- (b) Effective January 1, 2019, a person subject to the financial responsibility requirements of s. 324.022, Florida Statutes, must maintain minimum security requirements that enable the person to respond in damages for liability on account of accidents arising out of the use of a motor vehicle in the following amounts:
- 1. Beginning January 1, 2019, and continuing through December 31, 2020:
- a. Twenty thousand dollars for bodily injury to, or the death of, one person in any one crash and, subject to such limits for one person, in the amount of \$40,000 for bodily injury to, or the death of, two or more persons in any one crash; and
- b. Ten thousand dollars for damage to, or destruction of, the property of others in any one crash.
- 2. Beginning January 1, 2021, and continuing through December 31, 2022:
- a. Twenty-five thousand dollars for bodily injury to, or the death of, one person in any one crash and, subject to such limits for one person, in the amount of \$50,000 for bodily injury to, or the death of, two or more persons in any one crash; and
- b. Ten thousand dollars for damage to, or destruction of, the property of others in any one crash.
 - 3. Beginning January 1, 2023, and continuing thereafter:
 - a. Thirty thousand dollars for bodily injury to, or the

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2418 death of, one person in any one crash and, subject to such limits for one person, in the amount of \$60,000 for bodily 2419 injury to, or the death of, two or more persons in any one 2420 2421 crash; and

- b. Ten thousand dollars for damage to, or destruction of, the property of others in any one crash.
- (c) Personal injury protection insurance paid covered medical expenses for injuries sustained in a motor vehicle crash by the policyholder, passengers, and relatives residing in the policyholder's household.
- (d) Bodily injury liability coverage protects the insured, up to the coverage limits, against loss if the insured is legally responsible for the death of or bodily injury to others in a motor vehicle accident.
- (e) The policyholder may obtain underinsured motorist coverage, which provides benefits, up to the limits of such coverage, to a policyholder or other insured entitled to recover damages for bodily injury, sickness, disease, or death resulting from a motor vehicle accident with an uninsured or underinsured owner or operator of a motor vehicle.
- (f) If the policyholder's new or renewal motor vehicle insurance policy is effective before January 1, 2019, and contains personal injury protection and property damage liability coverage as required by state law before January 1, 2019, but does not meet minimum security requirements on or after January 1, 2019, the policy is deemed to meet minimum security requirements until it is renewed, nonrenewed, or canceled on or after January 1, 2019.
 - (g) A policyholder whose new or renewal policy becomes

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effective before January 1, 2019, but does not meet minimum security requirements on or after January 1, 2019, may change coverages under the policy so as to eliminate personal injury protection and to obtain coverage providing minimum security requirements, including bodily injury liability coverage, which are effective on or after January 1, 2019.

- (h) If the policyholder has any questions, he or she should contact the person named at the telephone number provided in the notice.
- (5) This section takes effect upon this act becoming a law. Section 51. Application of suspensions for failure to maintain security; reinstatement.—All suspensions for failure to maintain required security as required by law in effect before January 1, 2019, remain in full force and effect after January 1, 2019. A driver may reinstate a suspended driver license or registration as provided under s. 324.0221, Florida Statutes.

Section 52. Except as otherwise expressly provided in this act and except for this section, which shall take effect upon this act becoming a law, this act shall take effect January 1, 2019.

========= T I T L E A M E N D M E N T ========== 2468 2469 And the title is amended as follows:

Delete everything before the enacting clause

and insert:

An act relating to motor vehicle insurance; repealing ss. 627.730, 627.731, 627.7311, 627.732, 627.733, 627.734, 627.736, 627.737, 627.739, 627.7401,

A bill to be entitled

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2476 627.7403, and 627.7405, F.S., which comprise the 2477 Florida Motor Vehicle No-Fault Law; repealing s. 2478 627.7407, F.S., relating to application of the Florida 2479 Motor Vehicle No-Fault Law; amending s. 316.646, F.S.; 2480 revising a requirement for proof of security on a 2481 motor vehicle and the applicability of the 2482 requirement; amending s. 318.18, F.S.; conforming a 2483 provision to changes made by the act; amending s. 2484 320.02, F.S.; revising the motor vehicle insurance 2485 coverages that an applicant must show to register 2486 certain vehicles with the Department of Highway Safety 2487 and Motor Vehicles; deleting a requirement that 2488 specified information be included on a certain 2489 insurance proof-of-purchase card; revising 2490 construction; conforming provisions to changes made by 2491 the act; amending s. 320.0609, F.S.; conforming a 2492 provision to changes made by the act; amending s. 2493 320.27, F.S.; defining the term "garage liability 2494 insurance"; revising garage liability insurance 2495 requirements for motor vehicle dealer applicants; 2496 conforming a provision to changes made by the act; 2497 amending s. 320.771, F.S.; revising garage liability 2498 insurance requirements for recreational vehicle dealer 2499 license applicants; amending ss. 322.251 and 322.34, 2500 F.S.; conforming provisions to changes made by the 2501 act; amending s. 324.011, F.S.; revising legislative 2502 intent; amending s. 324.021, F.S.; revising 2503 definitions of the terms "motor vehicle" and "proof of 2504 financial responsibility"; revising, at specified

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timeframes, minimum coverage requirements for proof of financial responsibility for specified motor vehicles; defining the term "for-hire passenger transportation vehicle"; conforming provisions to changes made by the act; amending s. 324.022, F.S.; revising, at specified timeframes, minimum liability coverage requirements for motor vehicle owners or operators; revising authorized methods for meeting such requirements; revising the vehicles that are excluded from the definition of the term "motor vehicle" and providing security requirements for certain excluded vehicles; conforming provisions to changes made by the act; conforming cross-references; amending s. 324.0221, F.S.; revising applicability of certain insurer reporting and notice requirements as to policies providing certain liability coverages; conforming provisions to changes made by the act; amending s. 324.023, F.S.; conforming cross-references; amending s. 324.031, F.S.; revising applicability of a provision authorizing certain methods of proving financial responsibility; revising, at specified timeframes, the amount of a certificate of deposit required for a specified method of proof of financial responsibility; revising excess liability coverage requirements for a person electing to use such method; amending s. 324.032, F.S.; revising financial responsibility requirements for owners or lessees of for-hire passenger transportation vehicles and the applicability of such requirements; revising a

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requirement for a motor vehicle liability policy obtained to comply with such requirements; amending ss. 324.051, 324.071, 324.091, and 324.151, F.S.; making technical changes; amending s. 324.161, F.S.; revising requirements for a certificate of deposit that is required if a person elects a certain method of providing financial responsibility; amending s. 324.171, F.S.; revising, at specified timeframes, the minimum net worth requirements to qualify certain persons as self-insurers; conforming provisions to changes made by the act; amending s. 324.251, F.S.; revising the short title and an effective date; amending s. 400.9905, F.S.; revising the definition of the term "clinic" relating to reimbursements for health care services under motor vehicle insurance coverage; amending s. 400.991, F.S.; conforming a provision to changes made by the act; amending s. 400.9935, F.S.; revising a condition relating to certain clinic billings to apply to motor vehicle insurance carriers rather than to personal injury protection insurance carriers; amending s. 409.901, F.S.; revising the definition of the term "third-party benefit"; amending s. 409.910, F.S.; revising the definition of the term "medical coverage"; making technical changes; amending s. 456.057, F.S.; conforming a provision to changes made by the act; amending s. 456.072, F.S.; revising specified grounds for discipline for certain health professions relating to motor vehicle insurance claims rather than personal

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injury protection claims; defining the term "upcoded"; amending s. 626.9541, F.S.; conforming a provision to changes made by the act; revising the type of insurance coverage applicable to a certain prohibited act; conforming a cross-reference; amending s. 626.989, F.S.; revising the definition of the term "fraudulent insurance act" to include certain acts under a motor vehicle insurance policy rather than under the Florida Motor Vehicle No-Fault Law; amending s. 627.06501, F.S.; revising coverages that may provide for a reduction in motor vehicle insurance policy premium charges under certain circumstances; amending s. 627.0652, F.S.; revising coverages that must provide a premium charge reduction under certain circumstances; amending s. 627.0653, F.S.; revising coverages subject to premium discounts for specified motor vehicle equipment; amending s. 627.4132, F.S.; revising the coverages of a motor vehicle policy which are subject to a stacking prohibition; amending s. 627.7263, F.S.; revising provisions relating to the designation of primary insurance for rental and leasing driver's insurance; conforming provisions to changes made by the act; amending s. 627.727, F.S.; conforming provisions to changes made by the act; amending s. 627.7275, F.S.; revising applicability and required coverages for a motor vehicle insurance policy; requiring insureds or claimants, or their representatives, to provide insurers with a written notice of loss before bringing certain bad faith

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actions; providing that if an insurer complies with certain conditions, it does not violate a certain good faith duty and is not liable for a certain bad faith failure; requiring the trier of fact, in making certain evaluations, to consider whether the insurer or claimant made certain good faith efforts to cooperate with the insurer's investigation; providing a limitation on an insurer's liability relating to multiple third-party claimants under certain circumstances, if the insurer files an interpleader action within a specified timeframe; providing construction relating to the interpleader action; conforming provisions to changes made by the act; amending s. 627.728, F.S.; conforming a provision to changes made by the act; amending s. 627.7295, F.S.; revising the definitions of the terms "policy" and "binder"; revising the coverages of a motor vehicle insurance policy for which a licensed general lines agent may charge a specified fee; revising applicability; conforming a cross-reference; amending s. 627.7415, F.S.; revising, at specified intervals, the minimum levels of certain liability insurance required for commercial motor vehicles; amending s. 627.8405, F.S.; revising coverages in a policy sold in combination with an accidental death and dismemberment policy, which a premium finance company may not finance; revising rulemaking authority of the commission; amending ss. 627.915, 628.909, 705.184, and 713.78, F.S.; conforming provisions to changes

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made by the act; amending s. 817.234, F.S.; revising specified prohibited false and fraudulent insurance claims for benefits to those under a motor vehicle insurance policy rather than a personal injury protection insurance policy; conforming a provision to changes made by the act; conforming a cross-reference; providing applicability and construction relating to changes made by the act; defining the term "minimum security requirements"; providing requirements and procedures relating to motor vehicle insurance policies that include personal injury protection as of a specified date; requiring an insurer to provide, by a specified date, a specified notice to policyholders relating to requirements under the act; providing for construction relating to suspensions for failure to maintain required security in effect before a specified date; providing effective dates.

	LEGISLATIVE ACTION	
Senate		House
Comm: WD		
02/28/2018		
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Appropriations Subcommittee on Health and Human Services (Rouson) recommended the following:

Senate Substitute for Amendment (371248) (with title amendment)

Delete everything after the enacting clause and insert:

Section 1. Sections 627.730, 627.731, 627.7311, 627.732, 627.733, 627.734, 627.736, 627.737, 627.739, 627.7401, 627.7403, and 627.7405, Florida Statutes, which comprise the Florida Motor Vehicle No-Fault Law, are repealed.

Section 2. Section 627.7407, Florida Statutes, is repealed.

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Section 3. Subsection (1) of section 316.646, Florida Statutes, is amended to read:

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

- (1) Any person required by s. 324.022 to maintain liability security for property damage, liability security, required by s. 324.023 to maintain liability security for bodily injury, or death, or required by s. 627.733 to maintain personal injury protection security on a motor vehicle shall have in his or her immediate possession at all times while operating such motor vehicle proper proof of maintenance of the required security required under s. 324.021(7).
- (a) Such proof must shall be in a uniform paper or electronic format, as prescribed by the department, a valid insurance policy, an insurance policy binder, a certificate of insurance, or such other proof as may be prescribed by the department.
- (b) 1. The act of presenting to a law enforcement officer an electronic device displaying proof of insurance in an electronic format does not constitute consent for the officer to access any information on the device other than the displayed proof of insurance.
- 2. The person who presents the device to the officer assumes the liability for any resulting damage to the device.
- Section 4. Paragraph (b) of subsection (2) of section 318.18, Florida Statutes, is amended to read:
- 318.18 Amount of penalties. The penalties required for a noncriminal disposition pursuant to s. 318.14 or a criminal offense listed in s. 318.17 are as follows:

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- (2) Thirty dollars for all nonmoving traffic violations and:
 - (b) For all violations of ss. 320.0605, 320.07(1), 322.065, and 322.15(1). A Any person who is cited for a violation of s. 320.07(1) shall be charged a delinquent fee pursuant to s. 320.07(4).
 - 1. If a person who is cited for a violation of s. 320.0605 or s. 320.07 can show proof of having a valid registration at the time of arrest, the clerk of the court may dismiss the case and may assess a dismissal fee of up to \$10. A person who finds it impossible or impractical to obtain a valid registration certificate must submit an affidavit detailing the reasons for the impossibility or impracticality. The reasons may include, but are not limited to, the fact that the vehicle was sold, stolen, or destroyed; that the state in which the vehicle is registered does not issue a certificate of registration; or that the vehicle is owned by another person.
 - 2. If a person who is cited for a violation of s. 322.03, s. 322.065, or s. 322.15 can show a driver license issued to him or her and valid at the time of arrest, the clerk of the court may dismiss the case and may assess a dismissal fee of up to \$10.
 - 3. If a person who is cited for a violation of s. 316.646 can show proof of security as required by s. 324.021(7) s. 627.733, issued to the person and valid at the time of arrest, the clerk of the court may dismiss the case and may assess a dismissal fee of up to \$10. A person who finds it impossible or impractical to obtain proof of security must submit an affidavit detailing the reasons for the impracticality. The reasons may

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include, but are not limited to, the fact that the vehicle has since been sold, stolen, or destroyed; that the owner or registrant of the vehicle is not required by s. 627.733 to maintain personal injury protection insurance; or that the vehicle is owned by another person.

Section 5. Paragraphs (a) and (d) of subsection (5) of section 320.02, Florida Statutes, are amended to read:

320.02 Registration required; application for registration; forms.-

(5) (a) Proof that bodily injury liability coverage and property damage liability coverage personal injury protection benefits have been purchased if required under s. 324.022, s. 324.032, or s. 627.742, that medical payments coverage has been purchased if required under s. 627.7265 s. 627.733, that property damage liability coverage has been purchased as required under s. 324.022, that bodily injury liability or death coverage has been purchased if required under s. 324.023, and that combined bodily liability insurance and property damage liability insurance have been purchased if required under s. 627.7415 must shall be provided in the manner prescribed by law by the applicant at the time of application for registration of any motor vehicle that is subject to such requirements. The issuing agent may not shall refuse to issue registration if such proof of purchase is not provided. Insurers shall furnish uniform proof-of-purchase cards in a paper or electronic format in a form prescribed by the department and include the name of the insured's insurance company, the coverage identification number, and the make, year, and vehicle identification number of the vehicle insured. The card must contain a statement notifying



98 the applicant of the penalty specified under s. 316.646(4). The 99 card or insurance policy, insurance policy binder, or 100 certificate of insurance or a photocopy of any of these; an 101 affidavit containing the name of the insured's insurance 102 company, the insured's policy number, and the make and year of 103 the vehicle insured; or such other proof as may be prescribed by the department constitutes shall constitute sufficient proof of 104 105 purchase. If an affidavit is provided as proof, it must be in 106 substantially the following form: 107 108 Under penalty of perjury, I ... (Name of insured) ... do hereby 109 certify that I have ... (bodily injury liability and Personal 110 Injury Protection, property damage liability coverage, and 111 medical payments coverage, and, if required, Bodily Injury 112 Liability)... Insurance currently in effect with ... (Name of insurance company)... under ... (policy number)... covering 113 114 ... (make, year, and vehicle identification number of vehicle) (Signature of Insured) ... 115 116 117 Such affidavit must include the following warning: 118 119 WARNING: GIVING FALSE INFORMATION IN ORDER TO OBTAIN A VEHICLE 120 REGISTRATION CERTIFICATE IS A CRIMINAL OFFENSE UNDER FLORIDA 121 LAW. ANYONE GIVING FALSE INFORMATION ON THIS AFFIDAVIT IS 122 SUBJECT TO PROSECUTION. 123 124 If an application is made through a licensed motor vehicle 125 dealer as required under s. 319.23, the original or a photocopy photostatic copy of such card, insurance policy, insurance 126

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policy binder, or certificate of insurance or the original affidavit from the insured must shall be forwarded by the dealer to the tax collector of the county or the Department of Highway Safety and Motor Vehicles for processing. By executing the aforesaid affidavit, a no licensed motor vehicle dealer is not will be liable in damages for any inadequacy, insufficiency, or falsification of any statement contained therein. A card must also indicate the existence of any bodily injury liability insurance voluntarily purchased.

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



156 Section 6. Paragraph (b) of subsection (1) of section 320.0609, Florida Statutes, is amended to read: 157 158 320.0609 Transfer and exchange of registration license 159 plates; transfer fee.-160 (1)161 (b) The transfer of a license plate from a vehicle disposed of to a newly acquired vehicle does not constitute a new 162 163 registration. The application for transfer shall be accepted 164 without requiring proof of personal injury protection or 165 liability insurance. 166 Section 7. Paragraph (g) is added to subsection (1) of 167 section 320.27, Florida Statutes, and subsection (3) of that 168 section is amended, to read: 169 320.27 Motor vehicle dealers.-170 (1) DEFINITIONS.—The following words, terms, and phrases 171 when used in this section have the meanings respectively ascribed to them in this subsection, except where the context 172 173 clearly indicates a different meaning: 174 (q) "Garage liability insurance" means combined single-175 limit liability coverage, including property damage and bodily 176 injury liability coverage, in the amount of: 1. Beginning January 1, 2019, and continuing through 177 178 December 31, 2020, at least \$50,000. 179 2. Beginning January 1, 2021, and continuing through 180 December 31, 2022, at least \$60,000. 181 3. Beginning January 1, 2023 and thereafter, at least 182 \$70,000. 183 (3) APPLICATION AND FEE.—The application for the license

application must shall be in such form as may be prescribed by

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the department and is shall be subject to such rules with respect thereto as may be so prescribed by the department it. Such application must shall be verified by oath or affirmation and must shall contain a full statement of the name and birth date of the person or persons applying for the license therefor; the name of the firm or copartnership, with the names and places of residence of all members thereof, if such applicant is a firm or copartnership; the names and places of residence of the principal officers, if the applicant is a body corporate or other artificial body; the name of the state under whose laws the corporation is organized; the present and former place or places of residence of the applicant; and the prior business in which the applicant has been engaged and its the location thereof. The Such application must shall describe the exact location of the place of business and must shall state whether the place of business is owned by the applicant and when acquired, or, if leased, a true copy of the lease must shall be attached to the application. The applicant shall certify that the location provides an adequately equipped office and is not a residence; that the location affords sufficient unoccupied space upon and within which adequately to store all motor vehicles offered and displayed for sale; and that the location is a suitable place where the applicant can in good faith carry on such business and keep and maintain books, records, and files necessary to conduct such business, which must shall be available at all reasonable hours to inspection by the department or any of its inspectors or other employees. The applicant shall certify that the business of a motor vehicle dealer is the principal business that will which shall be

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conducted at that location. The application must shall contain a statement that the applicant is either franchised by a manufacturer of motor vehicles, in which case the name of each motor vehicle that the applicant is franchised to sell must shall be included, or an independent (nonfranchised) motor vehicle dealer. The application must shall contain other relevant information as may be required by the department. The applicant must furnish, including evidence, in a form approved by the department, that the applicant is insured under a garage liability insurance policy or a general liability insurance policy coupled with a business automobile policy having the garage liability insurance coverage required by this subsection, which shall include, at a minimum, \$25,000 combined single-limit liability coverage including bodily injury and property damage protection and \$10,000 personal injury protection. However, a salvage motor vehicle dealer as defined in subparagraph (1)(c)5. is exempt from the requirements for garage liability insurance and medical payments coverage insurance and personal injury protection insurance on those vehicles that cannot be legally operated on roads, highways, or streets in this state. Franchise dealers must submit a garage liability insurance policy, and all other dealers must submit a garage liability insurance policy or a general liability insurance policy coupled with a business automobile policy. Such policy must shall be for the license period, and evidence of a new or continued policy must shall be delivered to the department at the beginning of each license period. Upon making an initial application, the applicant shall pay to the department a fee of \$300 in addition to any other fees required by law. Applicants may choose to extend the

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licensure period for 1 additional year for a total of 2 years. An initial applicant shall pay to the department a fee of \$300 for the first year and \$75 for the second year, in addition to any other fees required by law. An applicant for renewal shall pay to the department \$75 for a 1-year renewal or \$150 for a 2year renewal, in addition to any other fees required by law. Upon making an application for a change of location, the applicant person shall pay a fee of \$50 in addition to any other fees now required by law. The department shall, in the case of every application for initial licensure, verify whether certain facts set forth in the application are true. Each applicant, general partner in the case of a partnership, or corporate officer and director in the case of a corporate applicant shall, must file a set of fingerprints with the department for the purpose of determining any prior criminal record or any outstanding warrants. The department shall submit the fingerprints to the Department of Law Enforcement for state processing and forwarding to the Federal Bureau of Investigation for federal processing. The actual cost of state and federal processing must shall be borne by the applicant and is in addition to the fee for licensure. The department may issue a license to an applicant pending the results of the fingerprint investigation, which license is fully revocable if the department subsequently determines that any facts set forth in the application are not true or correctly represented. Section 8. Paragraph (j) of subsection (3) of section 320.771, Florida Statutes, is amended to read:

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320.771 License required of recreational vehicle dealers.-

(3) APPLICATION.—The application for such license shall be

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in the form prescribed by the department and subject to such rules as may be prescribed by it. The application shall be verified by oath or affirmation and shall contain:

(j) A statement that the applicant is insured under a garage liability insurance policy in accordance with s. 320.27(1)(g), which shall include, at a minimum, \$25,000 combined single-limit liability coverage, including bodily injury and property damage protection, and \$10,000 personal injury protection, if the applicant is to be licensed as a dealer in, or intends to sell, recreational vehicles.

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

Section 9. Subsections (1) and (2) of section 322.251, Florida Statutes, are amended to read:

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

(1) All orders of cancellation, suspension, revocation, or disqualification issued under the provisions of this chapter, chapter 318, or chapter 324 must, or ss. 627.732-627.734 shall be given either by personal delivery thereof to the licensee whose license is being canceled, suspended, revoked, or disqualified or by deposit in the United States mail in an envelope, first class, postage prepaid, addressed to the licensee at his or her last known mailing address furnished to the department. Such mailing by the department constitutes

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notification, and any failure by the person to receive the mailed order will not affect or stay the effective date or term of the cancellation, suspension, revocation, or disqualification of the licensee's driving privilege.

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

Section 10. Paragraph (a) of subsection (8) of section 322.34, Florida Statutes, is amended to read:

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

- (8) (a) Upon the arrest of a person for the offense of driving while the person's driver license or driving privilege is suspended or revoked, the arresting officer shall determine:
- 1. Whether the person's driver license is suspended or revoked.
- 2. Whether the person's driver license has remained suspended or revoked since a conviction for the offense of driving with a suspended or revoked license.
- 3. Whether the suspension or revocation was made under s. 316.646 or s. 627.733, relating to failure to maintain required

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security, or under s. 322.264, relating to habitual traffic offenders.

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

Section 11. Section 324.011, Florida Statutes, is amended to read:

324.011 Legislative intent and purpose of chapter.—It is the Legislature's intent of this chapter to ensure that the privilege of owning or operating a motor vehicle in this state be exercised recognize the existing privilege to own or operate a motor vehicle on the public streets and highways of this state when such vehicles are used with due consideration for others' safety others and their property, and to promote safety, and to provide financial security requirements for such owners and or operators whose responsibility it is to recompense others for injury to person or property caused by the operation of a motor vehicle. Therefore, this chapter requires that every owner or operator of a motor vehicle required to be registered in this state establish, maintain, and it is required herein that the operator of a motor vehicle involved in a crash or convicted of certain traffic offenses meeting the operative provisions of s. 324.051(2) shall respond for such damages and show proof of financial ability to respond for damages arising out of the ownership, maintenance, or use of a motor vehicle in future accidents as a requisite to owning or operating a motor vehicle in this state his or her future exercise of such privileges.

Section 12. Subsections (1) and (7) and paragraph (c) of subsection (9) of section 324.021, Florida Statutes, are amended, and subsection (12) is added to that section, to read:

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

- (1) MOTOR VEHICLE.—Every self-propelled vehicle that is designed and required to be licensed for use upon a highway, including trailers and semitrailers designed for use with such vehicles, except traction engines, road rollers, farm tractors, power shovels, and well drillers, and every vehicle that is propelled by electric power obtained from overhead wires but not operated upon rails, but not including any personal delivery device as defined in s. 316.003, bicycle, or moped. However, the term "motor vehicle" does not include a motor vehicle as defined in s. 627.732(3) when the owner of such vehicle has complied with the requirements of ss. 627.730-627.7405, inclusive, unless the provisions of s. 324.051 apply; and, in such case, the applicable proof of insurance provisions of s. 320.02 apply.
- (7) PROOF OF FINANCIAL RESPONSIBILITY.—That Proof of ability to respond in damages for liability on account of crashes arising out of the ownership, maintenance, or use of a motor vehicle:
- (a) With respect to a motor vehicle that is not a commercial motor vehicle, nonpublic sector bus, or for-hire passenger transportation vehicle:
- 1. Beginning January 1, 2019, and continuing through December 31, 2020, in the amount of:
- a. Twenty thousand dollars for \$10,000 because of bodily injury to, or the death of, one person in any one crash and, \div



388 (b) subject to such limits for one person, in the amount of 389 \$40,000 for \$20,000 because of bodily injury to, or the death 390 of, two or more persons in any one crash; and b. Ten thousand dollars for damage to, or destruction of, 391 392 property of others in any one crash. 393 2. Beginning January 1, 2021, and continuing through 394 December 31, 2022, in the amount of: 395 a. Twenty-five thousand dollars for bodily injury to, or the death of, one person in any one crash and, subject to such 396 397 limits for one person, in the amount of \$50,000 for bodily 398 injury to, or the death of, two or more persons in any one 399 crash; and 400 b. Ten thousand dollars for damage to, or destruction of, 401 property of others in any one crash. 402 3. Beginning January 1, 2023, and continuing thereafter, in 403 the amount of: 404 a. Thirty thousand dollars for bodily injury to, or the 405 death of, one person in any one crash and, subject to such 406 limits for one person, in the amount of \$60,000 for bodily 407 injury to, or the death of, two or more persons in any one 408 crash; and 409 b.(c) Ten thousand dollars for damage In the amount of 410 \$10,000 because of injury to, or destruction of, property of 411 others in any one crash.; and 412 (b) (d) With respect to commercial motor vehicles and 413 nonpublic sector buses, in the amounts specified in s. 627.7415 414 ss. 627.7415 and 627.742, respectively. 415 (c) With respect to nonpublic sector buses, in the amounts

specified in s. 627.742.

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- (d) With respect to for-hire passenger transportation vehicles, in the amounts specified in s. 324.032.
 - (9) OWNER; OWNER/LESSOR.-
 - (c) Application.
- 1. The limits on liability in subparagraphs (b) 2. and 3. do not apply to an owner of motor vehicles that are used for commercial activity in the owner's ordinary course of business, other than a rental company that rents or leases motor vehicles. For purposes of this paragraph, the term "rental company" includes only an entity that is engaged in the business of renting or leasing motor vehicles to the general public and that rents or leases a majority of its motor vehicles to persons with no direct or indirect affiliation with the rental company. The term also includes a motor vehicle dealer that provides temporary replacement vehicles to its customers for up to 10 days. The term "rental company" also includes:
- a. A related rental or leasing company that is a subsidiary of the same parent company as that of the renting or leasing company that rented or leased the vehicle.
- b. The holder of a motor vehicle title or an equity interest in a motor vehicle title if the title or equity interest is held pursuant to or to facilitate an asset-backed securitization of a fleet of motor vehicles used solely in the business of renting or leasing motor vehicles to the general public and under the dominion and control of a rental company, as described in this subparagraph, in the operation of such rental company's business.
- 2. Furthermore, with respect to commercial motor vehicles as defined in s. 207.002 or s. 320.01 \pm 627.732, the limits on

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liability in subparagraphs (b) 2. and 3. do not apply if, at the time of the incident, the commercial motor vehicle is being used in the transportation of materials found to be hazardous for the purposes of the Hazardous Materials Transportation Authorization Act of 1994, as amended, 49 U.S.C. ss. 5101 et seq., and that is required pursuant to such act to carry placards warning others of the hazardous cargo, unless at the time of lease or rental either:

- a. The lessee indicates in writing that the vehicle will not be used to transport materials found to be hazardous for the purposes of the Hazardous Materials Transportation Authorization Act of 1994, as amended, 49 U.S.C. ss. 5101 et seq.; or
- b. The lessee or other operator of the commercial motor vehicle has in effect insurance with limits of at least \$5 million \$5,000,000 combined property damage and bodily injury liability.
- (12) FOR-HIRE PASSENGER TRANSPORTATION VEHICLE.—Every "forhire vehicle" as defined in s. 320.01(15) which is offered or used to provide transportation for persons, including taxicabs, limousines, and jitneys.

Section 13. Section 324.022, Florida Statutes, is amended to read:

- 324.022 Financial responsibility requirements for property damage.-
- (1) (a) Every owner or operator of a motor vehicle required to be registered in this state shall establish and continuously maintain the ability to respond in damages for liability on account of accidents arising out of the use of the motor vehicle in the amount of:



475 1. Beginning January 1, 2019, and continuing through December 31, 2020: 476 477 a. Twenty thousand dollars for bodily injury to, or the 478 death of, one person in any one crash and, subject to such 479 limits for one person, in the amount of \$40,000 for bodily 480 injury to, or the death of, two or more persons in any one 481 crash; and 482 b. Ten thousand dollars for damage to, or destruction of, 483 property of others in any one crash. 484 2. Beginning January 1, 2021, and continuing through 485 December 31, 2022: 486 a. Twenty-five thousand dollars for bodily injury to, or 487 the death of, one person in any one crash and, subject to such 488 limits for one person, in the amount of \$50,000 for bodily 489 injury to, or the death of, two or more persons in any one 490 crash; and 491 b. Ten thousand dollars for damage to, or destruction of, 492 property of others in any one crash. 493 3. Beginning January 1, 2023, and continuing thereafter: 494 a. Thirty thousand dollars for bodily injury to, or the 495 death of, one person in any one crash and, subject to such 496 limits for one person, in the amount of \$60,000 for bodily 497 injury to, or the death of, two or more persons in any one 498 crash; and 499 b. Ten thousand dollars for \$10,000 because of damage to,

met by one of the methods established in s. 324.031; by self-

insuring as authorized by s. 768.28(16); or by maintaining

(b) The requirements of paragraph (a) this section may be

or destruction of, property of others in any one crash.

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medical payments coverage under s. 627.7265 and a motor vehicle liability insurance policy that an insurance policy providing coverage for property damage liability in the amount of at least \$10,000 because of damage to, or destruction of, property of others in any one accident arising out of the use of the motor vehicle. The requirements of this section may also be met by having a policy which provides combined property damage liability and bodily injury liability coverage for any one crash arising out of the ownership, maintenance, or use of a motor vehicle which conforms to the requirements of s. 324.151 in the amount of:

- 1. At least \$50,000 for every owner or operator subject to the financial responsibility required in subparagraph (1)(a)1.
- 2. At least \$60,000 for every owner or operator subject to the financial responsibility required in subparagraph (1)(a)2.
- 3. At least \$70,000 for every owner or operator subject to the financial responsibility required in subparagraph (1)(a)3. \$30,000 for combined property damage liability and bodily injury liability for any one crash arising out of the use of the motor vehicle. The policy, with respect to coverage for property damage liability, must meet the applicable requirements of s. 324.151, subject to the usual policy exclusions that have been approved in policy forms by the Office of Insurance Regulation. No insurer shall have any duty to defend uncovered claims irrespective of their joinder with covered claims.
 - (2) As used in this section, the term:
- (a) "Motor vehicle" means any self-propelled vehicle that has four or more wheels and that is of a type designed and required to be licensed for use on the highways of this state,

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and any trailer or semitrailer designed for use with such vehicle. The term does not include the following:

- 1. A mobile home as defined in s. 320.01.
- 2. A motor vehicle that is used in mass transit and designed to transport more than five passengers, exclusive of the operator of the motor vehicle, and that is owned by a municipality, transit authority, or political subdivision of the state.
- 3. A school bus as defined in s. 1006.25, which shall maintain security as required under s. 316.615.
- 4. A commercial motor vehicle as defined in s. 207.002 or s. 320.01, which shall maintain security as required under ss. 324.031 and 627.7415.
- 5. A nonpublic sector bus, which shall maintain security as required under ss. 324.031 and 627.742.
- 6.4. A vehicle providing for-hire passenger transportation vehicle, which that is subject to the provisions of s. 324.031. A taxicab shall maintain security as required under s. 324.032 s. 324.032(1).
 - 7.5. A personal delivery device as defined in s. 316.003.
- (b) "Owner" means the person who holds legal title to a motor vehicle or the debtor or lessee who has the right to possession of a motor vehicle that is the subject of a security agreement or lease with an option to purchase.
- (3) Each nonresident owner or registrant of a motor vehicle that, whether operated or not, has been physically present within this state for more than 90 days during the preceding 365 days shall maintain security as required by subsection (1). The security must be that is in effect continuously throughout the

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period the motor vehicle remains within this state.

(4) An The owner or registrant of a motor vehicle who is exempt from the requirements of this section if she or he is a member of the United States Armed Forces and is called to or on active duty outside the United States in an emergency situation is exempt from this section while he or she. The exemption provided by this subsection applies only as long as the member of the Armed Forces is on such active duty. This exemption outside the United States and applies only while the vehicle covered by the security is not operated by any person. Upon receipt of a written request by the insured to whom the exemption provided in this subsection applies, the insurer shall cancel the coverages and return any unearned premium or suspend the security required by this section. Notwithstanding s. 324.0221(2) s. 324.0221(3), the department may not suspend the registration or operator's license of an any owner or registrant of a motor vehicle during the time she or he qualifies for the an exemption under this subsection. An Any owner or registrant of a motor vehicle who qualifies for the an exemption under this subsection shall immediately notify the department before prior to and at the end of the expiration of the exemption.

Section 14. Subsections (1) and (2) of section 324.0221, Florida Statutes, are amended to read:

324.0221 Reports by insurers to the department; suspension of driver license and vehicle registrations; reinstatement.

(1) (a) Each insurer that has issued a policy providing medical payments coverage or personal injury protection coverage or property damage liability coverage shall report the cancellation or nonrenewal thereof to the department within 10

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

(b) With respect to an insurance policy providing medical payments coverage or personal injury protection coverage or property damage liability coverage, each insurer shall notify the named insured, or the first-named insured in the case of a commercial fleet policy, in writing that any cancellation or nonrenewal of the policy will be reported by the insurer to the department. The notice must also inform the named insured that failure to maintain medical payments coverage, bodily injury liability personal injury protection coverage, and property damage liability coverage on a motor vehicle when required by law may result in the loss of registration and driving privileges in this state and inform the named insured of the

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amount of the reinstatement fees required by this section. This notice is for informational purposes only, and an insurer is not civilly liable for failing to provide this notice.

- (2) The department shall suspend, after due notice and an opportunity to be heard, the registration and driver license of any owner or registrant of a motor vehicle for with respect to which security is required under s. 324.022, s. 324.032, s. 627.7415, or s. 627.742 ss. 324.022 and 627.733 upon:
- (a) The department's records showing that the owner or registrant of such motor vehicle did not have the in full force and effect when required security in full force and effect that complies with the requirements of ss. 324.022 and 627.733; or
- (b) Notification by the insurer to the department, in a form approved by the department, of cancellation or termination of the required security.

Section 15. Section 324.023, Florida Statutes, is amended to read:

324.023 Financial responsibility for bodily injury or death.-In addition to any other financial responsibility required by law, every owner or operator of a motor vehicle that is required to be registered in this state, or that is located within this state, and who, regardless of adjudication of quilt, has been found guilty of or entered a plea of guilty or nolo contendere to a charge of driving under the influence under s. 316.193 after October 1, 2007, shall, by one of the methods established in s. 324.031(1) (a) or (b) $\frac{324.031(1)}{100}$ or $\frac{324.031(1)}{100}$ or $\frac{324.031(1)}{100}$ establish and maintain the ability to respond in damages for liability on account of accidents arising out of the use of a motor vehicle in the amount of \$100,000 because of bodily injury

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to, or death of, one person in any one crash and, subject to such limits for one person, in the amount of \$300,000 because of bodily injury to, or death of, two or more persons in any one crash and in the amount of \$50,000 because of property damage in any one crash. If the owner or operator chooses to establish and maintain such ability by furnishing a certificate of deposit pursuant to s. 324.031(1) (b) s. 324.031(2), such certificate of deposit must be at least \$350,000. Such higher limits must be carried for a minimum period of 3 years. If the owner or operator has not been convicted of driving under the influence or a felony traffic offense for a period of 3 years from the date of reinstatement of driving privileges for a violation of s. 316.193, the owner or operator shall be exempt from this section.

Section 16. Section 324.031, Florida Statutes, is amended to read:

324.031 Manner of proving financial responsibility.-

- (1) The owner or operator of a taxicab, limousine, jitney, or any other for-hire passenger transportation vehicle may prove financial responsibility by providing satisfactory evidence of holding a motor vehicle liability policy as defined in s. 324.021(8) or s. 324.151, which policy is issued by an insurance carrier which is a member of the Florida Insurance Guaranty Association. The operator or owner of a motor vehicle other than a for-hire passenger transportation vehicle any other vehicle may prove his or her financial responsibility by:
- (a) (1) Furnishing satisfactory evidence of holding a motor vehicle liability policy as defined in ss. 324.021(8) and 324.151;

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- (b) (2) Furnishing a certificate of self-insurance showing a deposit of cash in accordance with s. 324.161; or
- (c) (3) Furnishing a certificate of self-insurance issued by the department in accordance with s. 324.171.
- (2) (a) Any person, including any firm, partnership, association, corporation, or other person, other than a natural person, electing to use the method of proof specified in paragraph (1)(b) subsection (2) shall furnish a certificate of deposit equal to the number of vehicles owned times:
- 1. Fifty thousand dollars, to a maximum of \$200,000, from January 1, 2019, through December 31, 2020.
- 2. Sixty thousand dollars, to a maximum of \$240,000, from January 1, 2021, through December 31, 2022.
- 3. Seventy thousand dollars, \$30,000, to a maximum of \$280,000, from January 1, 2023, and thereafter. \$120,000;
- (b) In addition, any such person, other than a natural person, shall maintain insurance providing coverage conforming to the requirements of s. 324.151 in excess of the amount of the certificate of deposit, with limits of at least:
- 1. One hundred twenty-five thousand dollars for bodily injury to, or the death of, one person in any one crash and, subject to such limits for one person, in the amount of \$250,000 for bodily injury to, or the death of, two or more persons in any one crash, and \$50,000 for damage to, or destruction of, property of others in any one crash; or \$10,000/20,000/10,000 or \$30,000 combined single limits, and such excess insurance shall provide minimum limits of \$125,000/250,000/50,000 or \$300,000 combined single limits. These increased limits shall not affect the requirements for proving financial responsibility under s.



324.032(1).

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- 2. Three hundred thousand dollars for combined bodily injury liability and property damage liability for any one crash.
- Section 17. Section 324.032, Florida Statutes, is amended to read:
- 324.032 Manner of proving Financial responsibility for; for-hire passenger transportation vehicles. - Notwithstanding the provisions of s. 324.031:
- (1) An owner or lessee of a for-hire passenger transportation vehicle that is required to be registered in this state shall establish and continuously maintain the ability to respond in damages for liability on account of accidents arising out of the ownership, maintenance, or use of the for-hire passenger transportation vehicle, in the amount of:
- (a) One hundred twenty-five thousand dollars for bodily injury to, or the death of, one person in any one crash and, subject to such limits for one person, in the amount of \$250,000 for bodily injury to, or the death of, two or more persons in any one crash; and A person who is either the owner or a lessee required to maintain insurance under s. 627.733(1)(b) and who operates one or more taxicabs, limousines, jitneys, or any other for-hire passenger transportation vehicles may prove financial responsibility by furnishing satisfactory evidence of holding a motor vehicle liability policy, but with minimum limits of \$125,000/250,000/50,000.
- (b) Fifty thousand dollars for damage to, or destruction of, property of others in any one crash A person who is either the owner or a lessee required to maintain insurance under s.



324.021(9)(b) and who operates limousines, jitneys, or any for-hire passenger vehicles, other than taxicabs, may prove financial responsibility by furnishing satisfactory evidence of holding a motor vehicle liability policy as defined in s. 324.031.

(2) Except as provided in subsection (3), the requirements of this section must be met by the owner or lessee providing satisfactory evidence of holding a motor vehicle liability policy conforming to the requirements of s. 324.151 which is issued by an insurance carrier that is a member of the Florida Insurance Guaranty Association.

(3) (2) An owner or a lessee who is required to maintain insurance under s. 324.021(9)(b) and who operates at least 300 taxicabs, limousines, jitneys, or any other for-hire passenger transportation vehicles may provide financial responsibility by complying with the provisions of s. 324.171, such compliance to be demonstrated by maintaining at its principal place of business an audited financial statement, prepared in accordance with generally accepted accounting principles, and providing to the department a certification issued by a certified public accountant that the applicant's net worth is at least equal to the requirements of s. 324.171 as determined by the Office of Insurance Regulation of the Financial Services Commission, including claims liabilities in an amount certified as adequate by a Fellow of the Casualty Actuarial Society.

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Upon request by the department, the applicant shall must provide the department at the applicant's principal place of business in this state access to the applicant's underlying financial

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information and financial statements that provide the basis of the certified public accountant's certification. The applicant shall reimburse the requesting department for all reasonable costs incurred by it in reviewing the supporting information. The maximum amount of self-insurance permissible under this subsection is \$300,000 and must be stated on a per-occurrence basis, and the applicant shall maintain adequate excess insurance issued by an authorized or eligible insurer licensed or approved by the Office of Insurance Regulation. All risks self-insured shall remain with the owner or lessee providing it, and the risks are not transferable to any other person, unless a policy complying with subsections (1) and (2) subsection (1) is obtained.

Section 18. Paragraph (b) of subsection (2) of section 324.051, Florida Statutes, is amended to read:

324.051 Reports of crashes; suspensions of licenses and registrations.-

(2)

- (b) This subsection does shall not apply:
- 1. To such operator or owner if such operator or owner had in effect at the time of such crash or traffic conviction a motor vehicle an automobile liability policy with respect to all of the registered motor vehicles owned by such operator or owner.
- 2. To such operator, if not the owner of such motor vehicle, if there was in effect at the time of such crash or traffic conviction a motor vehicle an automobile liability policy or bond with respect to his or her operation of motor vehicles not owned by him or her.

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- 3. To such operator or owner if the liability of such operator or owner for damages resulting from such crash is, in the judgment of the department, covered by any other form of liability insurance or bond.
- 4. To any person who has obtained from the department a certificate of self-insurance, in accordance with s. 324.171, or to any person operating a motor vehicle for such self-insurer.

No such policy or bond shall be effective under this subsection unless it contains limits of not less than those specified in s. 324.021(7).

Section 19. Section 324.071, Florida Statutes, is amended to read:

324.071 Reinstatement; renewal of license; reinstatement fee.-An Any operator or owner whose license or registration has been suspended pursuant to s. 324.051(2), s. 324.072, s. 324.081, or s. 324.121 may effect its reinstatement upon compliance with the provisions of s. 324.051(2)(a)3. or 4., or s. 324.081(2) and (3), as the case may be, and with one of the provisions of s. 324.031 and upon payment to the department of a nonrefundable reinstatement fee of \$15. Only one such fee may shall be paid by any one person regardless irrespective of the number of licenses and registrations to be then reinstated or issued to such person. All Such fees must shall be deposited to a department trust fund. If When the reinstatement of any license or registration is effected by compliance with s. 324.051(2)(a)3. or 4., the department may shall not renew the license or registration within a period of 3 years after from such reinstatement, nor may shall any other license or

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registration be issued in the name of such person, unless the operator continues is continuing to comply with one of the provisions of s. 324.031.

Section 20. Subsection (1) of section 324.091, Florida Statutes, is amended to read:

324.091 Notice to department; notice to insurer.

(1) Each owner and operator involved in a crash or conviction case within the purview of this chapter shall furnish evidence of automobile liability insurance or motor vehicle liability insurance within 14 days after the date of the mailing of notice of crash by the department in the form and manner as it may designate. Upon receipt of evidence that a an automobile liability policy or motor vehicle liability policy was in effect at the time of the crash or conviction case, the department shall forward to the insurer such information for verification in a method as determined by the department. The insurer shall respond to the department within 20 days after the notice as to whether or not such information is valid. If the department determines that a an automobile liability policy or motor vehicle liability policy was not in effect and did not provide coverage for both the owner and the operator, it must shall take action as it is authorized to do under this chapter.

Section 21. Section 324.151, Florida Statutes, is amended to read:

324.151 Motor vehicle liability policies; required provisions.-

(1) A motor vehicle liability policy that serves as to be proof of financial responsibility under s. 324.031(1) must shall be issued to owners or operators of motor vehicles under



the following provisions:

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- (a) A motor vehicle An owner's liability insurance policy issued to an owner of a motor vehicle registered in this state must shall designate by explicit description or by appropriate reference all motor vehicles for with respect to which coverage is thereby granted. The policy must and shall insure the person or persons owner named therein and any other person as operator using such motor vehicle or motor vehicles with the express or implied permission of such owner against loss from the liability imposed by law for damage arising out of the ownership, maintenance, or use of any such motor vehicle or motor vehicles within the United States or the Dominion of Canada, subject to limits, exclusive of interest and costs with respect to each such motor vehicle as is provided for under s. 324.021(7). Insurers may make available, with respect to property damage liability coverage, a deductible amount not to exceed \$500. In the event of a property damage loss covered by a policy containing a property damage deductible provision, the insurer shall pay to the third-party claimant the amount of any property damage liability settlement or judgment, subject to policy limits, as if no deductible existed.
- (b) An operator's motor vehicle liability policy of insurance must shall insure the person or persons named therein against loss from the liability imposed upon him or her by law for damages arising out of the use by the person of any motor vehicle not owned by him or her, with the same territorial limits and subject to the same limits of liability as referred to above with respect to an owner's policy of liability insurance.

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- (c) All such motor vehicle liability policies must shall state the name and address of the named insured, the coverage afforded by the policy, the premium charged therefor, the policy period, the limits of liability, and must shall contain an agreement or be endorsed that insurance is provided in accordance with the coverage defined in this chapter as respects bodily injury and death or property damage or both and is subject to all provisions of this chapter. The Said policies must shall also contain a provision that the satisfaction by an insured of a judgment for such injury or damage may shall not be a condition precedent to the right or duty of the insurance carrier to make payment on account of such injury or damage, and must shall also contain a provision that bankruptcy or insolvency of the insured or of the insured's estate may shall not relieve the insurance carrier of any of its obligations under the said policy.
- (2) The provisions of This section is shall not be applicable to any automobile liability policy unless and until it is furnished as proof of financial responsibility for the future pursuant to s. 324.031, and then only from and after the date the said policy is so furnished.

Section 22. Section 324.161, Florida Statutes, is amended to read:

324.161 Proof of financial responsibility; deposit.—If a person elects to prove his or her financial responsibility under the method of proof specified in s. 324.031(1)(b), he or she must obtain proof of a certificate of deposit annually, in the amount required under s. 324.031(2), from a financial institution insured by the Federal Deposit Insurance Corporation

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or the National Credit Union Administration. Proof of such certificate of deposit Annually, before any certificate of insurance may be issued to a person, including any firm, partnership, association, corporation, or other person, other than a natural person, proof of a certificate of deposit of \$30,000 issued and held by a financial institution must be submitted to the department annually. A power of attorney will be issued to and held by the department and may be executed upon a judgment issued against such person making the deposit, for damages for because of bodily injury to or death of any person or for damages for because of injury to or destruction of property resulting from the use or operation of any motor vehicle occurring after such deposit was made. Money so deposited is shall not be subject to attachment or execution unless such attachment or execution arises shall arise out of a lawsuit suit for such damages as aforesaid.

Section 23. Subsections (1) and (2) of section 324.171, Florida Statutes, are amended to read:

324.171 Self-insurer.

- (1) A Any person may qualify as a self-insurer by obtaining a certificate of self-insurance from the department. which may, in its discretion and Upon application of such a person, the department may issue a said certificate of self-insurance if the applicant when such person has satisfied the requirements of this section to qualify as a self-insurer under this section:
- (a) A private individual with private passenger vehicles must shall possess a net unencumbered worth: of
- 1. Beginning January 1, 2019, through December 31, 2020, of at least \$80,000.

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- 939 2. Beginning January 1, 2021, through December 31, 2022, of 940 at least \$100,000.
 - 3. Beginning January 1, 2023, and thereafter, of at least \$120,000 \$40,000.
 - (b) A person, including any firm, partnership, association, corporation, or other person, other than a natural person, must shall:
 - 1. Possess a net unencumbered worth: of
 - a. Beginning January 1, 2019, through December 31, 2020, of at least \$80,000 for the first motor vehicle and \$40,000 for each additional motor vehicle.
 - b. Beginning January 1, 2021, through December 31, 2022, of at least \$100,000 for the first motor vehicle and \$50,000 for each additional motor vehicle.
 - c. Beginning January 1, 2023, and thereafter, of at least \$120,000 + 40,000 for the first motor vehicle and \$60,000 + 20,000for each additional motor vehicle; or
 - 2. Maintain sufficient net worth, in an amount determined by the department, to be financially responsible for potential losses. The department shall annually determine the minimum net worth sufficient to satisfy this subparagraph as determined annually by the department, pursuant to rules adopted $\frac{1}{2}$ promulgated by the department, with the assistance of the Office of Insurance Regulation of the Financial Services Commission, to be financially responsible for potential losses. The rules must consider any shall take into consideration excess insurance carried by the applicant. The department's determination must shall be based upon reasonable actuarial principles considering the frequency, severity, and loss development of claims incurred

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by casualty insurers writing coverage on the type of motor vehicles for which a certificate of self-insurance is desired.

- (c) The owner of a commercial motor vehicle, as defined in s. 207.002 or s. 320.01, may qualify as a self-insurer subject to the standards provided for in subparagraph (b) 2.
- (2) The self-insurance certificate must shall provide limits of liability insurance in the amounts specified under s. 324.021(7) or s. 627.7415 and shall provide personal injury protection coverage under s. 627.733(3)(b).

Section 24. Section 324.251, Florida Statutes, is amended to read:

324.251 Short title.—This chapter may be cited as the "Financial Responsibility Law of 2018 1955" and is shall become effective at 12:01 a.m., January 1, 2019 October 1, 1955.

Section 25. Subsection (4) of section 400.9905, Florida Statutes, is amended to read:

400.9905 Definitions.-

- (4) "Clinic" means an entity where health care services are provided to individuals and which tenders charges for reimbursement for such services, including a mobile clinic and a portable equipment provider. As used in this part, the term does not include and the licensure requirements of this part do not apply to:
- (a) Entities licensed or registered by the state under chapter 395; entities licensed or registered by the state and providing only health care services within the scope of services authorized under their respective licenses under ss. 383.30-383.335, chapter 390, chapter 394, chapter 397, this chapter except part X, chapter 429, chapter 463, chapter 465, chapter

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466, chapter 478, part I of chapter 483, chapter 484, or chapter 651; end-stage renal disease providers authorized under 42 C.F.R. part 405, subpart U; providers certified under 42 C.F.R. part 485, subpart B or subpart H; or any entity that provides neonatal or pediatric hospital-based health care services or other health care services by licensed practitioners solely within a hospital licensed under chapter 395.

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

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478, part I of chapter 483, chapter 484, or chapter 651; endstage renal disease providers authorized under 42 C.F.R. part 405, subpart U; providers certified under 42 C.F.R. part 485, subpart B or subpart H; or any entity that provides neonatal or pediatric hospital-based health care services by licensed practitioners solely within a hospital under chapter 395.

- (d) Entities that are under common ownership, directly or indirectly, with an entity licensed or registered by the state pursuant to chapter 395; entities that are under common ownership, directly or indirectly, with an entity licensed or registered by the state and providing only health care services within the scope of services authorized pursuant to their respective licenses under ss. 383.30-383.335, chapter 390, chapter 394, chapter 397, this chapter except part X, chapter 429, chapter 463, chapter 465, chapter 466, chapter 478, part I of chapter 483, chapter 484, or chapter 651; end-stage renal disease providers authorized under 42 C.F.R. part 405, subpart U; providers certified under 42 C.F.R. part 485, subpart B or subpart H; or any entity that provides neonatal or pediatric hospital-based health care services by licensed practitioners solely within a hospital licensed under chapter 395.
- (e) An entity that is exempt from federal taxation under 26 U.S.C. s. 501(c)(3) or (4), an employee stock ownership plan under 26 U.S.C. s. 409 that has a board of trustees at least two-thirds of which are Florida-licensed health care practitioners and provides only physical therapy services under physician orders, any community college or university clinic, and any entity owned or operated by the federal or state government, including agencies, subdivisions, or municipalities



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- (f) A sole proprietorship, group practice, partnership, or corporation that provides health care services by physicians covered by s. 627.419, that is directly supervised by one or more of such physicians, and that is wholly owned by one or more of those physicians or by a physician and the spouse, parent, child, or sibling of that physician.
- 1062 (q) A sole proprietorship, group practice, partnership, or 1063 corporation that provides health care services by licensed 1064 health care practitioners under chapter 457, chapter 458, 1065 chapter 459, chapter 460, chapter 461, chapter 462, chapter 463, 1066 chapter 466, chapter 467, chapter 480, chapter 484, chapter 486, 1067 chapter 490, chapter 491, or part I, part III, part X, part 1068 XIII, or part XIV of chapter 468, or s. 464.012, and that is 1069 wholly owned by one or more licensed health care practitioners, 1070 or the licensed health care practitioners set forth in this 1071 paragraph and the spouse, parent, child, or sibling of a 1072 licensed health care practitioner if one of the owners who is a 1073 licensed health care practitioner is supervising the business 1074 activities and is legally responsible for the entity's 1075 compliance with all federal and state laws. However, a health 1076 care practitioner may not supervise services beyond the scope of 1077 the practitioner's license, except that, for the purposes of 1078 this part, a clinic owned by a licensee in s. 456.053(3)(b) 1079 which provides only services authorized pursuant to s. 456.053(3)(b) may be supervised by a licensee specified in s. 1080 1081 456.053(3)(b).
 - (h) Clinical facilities affiliated with an accredited medical school at which training is provided for medical

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students, residents, or fellows.

- (i) Entities that provide only oncology or radiation therapy services by physicians licensed under chapter 458 or chapter 459 or entities that provide oncology or radiation therapy services by physicians licensed under chapter 458 or chapter 459 which are owned by a corporation whose shares are publicly traded on a recognized stock exchange.
- (j) Clinical facilities affiliated with a college of chiropractic accredited by the Council on Chiropractic Education at which training is provided for chiropractic students.
- (k) Entities that provide licensed practitioners to staff emergency departments or to deliver anesthesia services in facilities licensed under chapter 395 and that derive at least 90 percent of their gross annual revenues from the provision of such services. Entities claiming an exemption from licensure under this paragraph must provide documentation demonstrating compliance.
- (1) Orthotic, prosthetic, pediatric cardiology, or perinatology clinical facilities or anesthesia clinical facilities that are not otherwise exempt under paragraph (a) or paragraph (k) and that are a publicly traded corporation or are wholly owned, directly or indirectly, by a publicly traded corporation. As used in this paragraph, a publicly traded corporation is a corporation that issues securities traded on an exchange registered with the United States Securities and Exchange Commission as a national securities exchange.
- (m) Entities that are owned by a corporation that has \$250 million or more in total annual sales of health care services provided by licensed health care practitioners where one or more

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of the persons responsible for the operations of the entity is a health care practitioner who is licensed in this state and who is responsible for supervising the business activities of the entity and is responsible for the entity's compliance with state law for purposes of this part.

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

exempted under s. 627.736(5)(h).



Notwithstanding this subsection, an entity shall be deemed a 1143 1144 clinic and must be licensed under this part in order to receive 1145 medical payments coverage reimbursement under s. 627.7265 the 1146 Florida Motor Vehicle No-Fault Law, ss. 627.730-627.7405, unless

Section 26. Subsection (6) of section 400.991, Florida Statutes, is amended to read:

400.991 License requirements; background screenings; prohibitions.-

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

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INSURANCE FRAUD NOTICE.—A person commits a fraudulent insurance act, as defined in s. 626.989, Florida Statutes, if the person who knowingly submits a false, misleading, or fraudulent application or other document when applying for licensure as a health care clinic, seeking an exemption from licensure as a health care clinic, or demonstrating compliance with part X of chapter 400, Florida Statutes, with the intent to use the license, exemption from licensure, or demonstration of compliance to provide services or seek reimbursement under a motor vehicle liability insurance policy's medical payments coverage the Florida Motor Vehicle No-Fault Law, commits a fraudulent insurance act, as defined in s. 626.989, Florida Statutes. A person who presents a claim for

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benefits under medical payments coverage, personal injury protection benefits knowing that the payee knowingly submitted such health care clinic application or document, commits insurance fraud, as defined in s. 817.234, Florida Statutes. Section 27. Paragraph (g) of subsection (1) of section 400.9935, Florida Statutes, is amended to read:

- 400.9935 Clinic responsibilities.-
- (1) Each clinic shall appoint a medical director or clinic director who shall agree in writing to accept legal responsibility for the following activities on behalf of the clinic. The medical director or the clinic director shall:
- (q) Conduct systematic reviews of clinic billings to ensure that the billings are not fraudulent or unlawful. Upon discovery of an unlawful charge, the medical director or clinic director shall take immediate corrective action. If the clinic performs only the technical component of magnetic resonance imaging, static radiographs, computed tomography, or positron emission tomography, and provides the professional interpretation of such services, in a fixed facility that is accredited by a national accrediting organization that is approved by the Centers for Medicare and Medicaid Services for magnetic resonance imaging and advanced diagnostic imaging services and if, in the preceding quarter, the percentage of scans performed by that clinic which was billed to motor vehicle all personal injury protection insurance carriers under medical payments coverage was less than 15 percent, the chief financial officer of the clinic may, in a written acknowledgment provided to the agency, assume the responsibility for the conduct of the systematic

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reviews of clinic billings to ensure that the billings are not fraudulent or unlawful.

Section 28. Subsection (28) of section 409.901, Florida Statutes, is amended to read:

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

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

Section 29. Paragraph (f) of subsection (11) of section 409.910, Florida Statutes, is amended to read:

409.910 Responsibility for payments on behalf of Medicaid-

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eligible persons when other parties are liable.-

- (11) The agency may, as a matter of right, in order to enforce its rights under this section, institute, intervene in, or join any legal or administrative proceeding in its own name in one or more of the following capacities: individually, as subrogee of the recipient, as assignee of the recipient, or as lienholder of the collateral.
- (f) Notwithstanding any provision in this section to the contrary, in the event of an action in tort against a third party in which the recipient or his or her legal representative is a party which results in a judgment, award, or settlement from a third party, the amount recovered shall be distributed as follows:
- 1. After attorney attorney's fees and taxable costs as defined by the Florida Rules of Civil Procedure, one-half of the remaining recovery shall be paid to the agency up to the total amount of medical assistance provided by Medicaid.
- 2. The remaining amount of the recovery shall be paid to the recipient.
- 3. For purposes of calculating the agency's recovery of medical assistance benefits paid, the fee for services of an attorney retained by the recipient or his or her legal representative shall be calculated at 25 percent of the judgment, award, or settlement.
- 4. Notwithstanding any other provision of this section to the contrary, the agency shall be entitled to all medical coverage benefits up to the total amount of medical assistance provided by Medicaid. For purposes of this paragraph, the term "medical coverage" means any benefits under health insurance, a

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health maintenance organization, a preferred provider arrangement, or a prepaid health clinic, and the portion of benefits designated for medical payments under coverage for workers' compensation coverage, motor vehicle insurance coverage, personal injury protection, and casualty coverage.

Section 30. Paragraph (k) of subsection (2) of section 456.057, Florida Statutes, is amended to read:

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

- (2) As used in this section, the terms "records owner," "health care practitioner," and "health care practitioner's employer" do not include any of the following persons or entities; furthermore, the following persons or entities are not authorized to acquire or own medical records, but are authorized under the confidentiality and disclosure requirements of this section to maintain those documents required by the part or chapter under which they are licensed or regulated:
- (k) Persons or entities practicing under s. 627.7265 s. 627.736(7).

Section 31. Paragraphs (ee) and (ff) of subsection (1) of section 456.072, Florida Statutes, are amended to read:

456.072 Grounds for discipline; penalties; enforcement.

- (1) The following acts shall constitute grounds for which the disciplinary actions specified in subsection (2) may be taken:
- (ee) With respect to making a medical payments coverage personal injury protection claim under s. 627.7265 as required by s. 627.736, intentionally submitting a claim, statement, or bill that has been upcoded. As used in this paragraph, the term

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"upcoded" means an action that submits a billing code that would result in payment greater in amount than would be paid using a billing code that accurately describes the services performed. The term does not include an otherwise lawful bill by a magnetic resonance imaging facility, which globally combines both technical and professional components, if the amount of the global bill is not more than the components if billed separately; however, payment of such a bill constitutes payment in full for all components of such service "upcoded" as defined in s. 627.732.

(ff) With respect to making a medical payments coverage personal injury protection claim as required under s. 627.7265 by s. 627.736, intentionally submitting a claim, statement, or bill for payment of services that were not rendered.

Section 32. Paragraphs (i) and (o) of subsection (1) of section 626.9541, Florida Statutes, are amended to read:

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

- (1) UNFAIR METHODS OF COMPETITION AND UNFAIR OR DECEPTIVE ACTS.—The following are defined as unfair methods of competition and unfair or deceptive acts or practices:
 - (i) Unfair claim settlement practices.-
- 1. Attempting to settle claims on the basis of an application, when serving as a binder or intended to become a part of the policy, or any other material document which was altered without notice to, or knowledge or consent of, the insured;
- 2. A material misrepresentation made to an insured or any other person having an interest in the proceeds payable under

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such contract or policy, for the purpose and with the intent of effecting settlement of such claims, loss, or damage under such contract or policy on less favorable terms than those provided in, and contemplated by, such contract or policy; or

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

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

- 4. Failing to pay undisputed amounts of partial or full benefits owed under first-party property insurance policies within 90 days after an insurer receives notice of a residential property insurance claim, determines the amounts of partial or full benefits, and agrees to coverage, unless payment of the undisputed benefits is prevented by an act of God, prevented by the impossibility of performance, or due to actions by the insured or claimant that constitute fraud, lack of cooperation, or intentional misrepresentation regarding the claim for which benefits are owed.
- (o) Illegal dealings in premiums; excess or reduced charges for insurance.-
- 1. Knowingly collecting any sum as a premium or charge for insurance, which is not then provided, or is not in due course to be provided, subject to acceptance of the risk by the insurer, by an insurance policy issued by an insurer as permitted by this code.
- 2. Knowingly collecting as a premium or charge for insurance any sum in excess of or less than the premium or charge applicable to such insurance, in accordance with the applicable classifications and rates as filed with and approved

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

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

b. An insurer which imposes and collects such a surcharge

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

- (I) Lawfully parked;
- (II) Reimbursed by, or on behalf of, a person responsible for the accident or has a judgment against such person;
- (III) Struck in the rear by another vehicle headed in the same direction and was not convicted of a moving traffic violation in connection with the accident:
- (IV) Hit by a "hit-and-run" driver, if the accident was reported to the proper authorities within 24 hours after discovering the accident;
- (V) Not convicted of a moving traffic violation in connection with the accident, but the operator of the other automobile involved in such accident was convicted of a moving traffic violation;
- (VI) Finally adjudicated not to be liable by a court of competent jurisdiction;
- (VII) In receipt of a traffic citation which was dismissed or nolle prossed; or
- (VIII) Not at fault as evidenced by a written statement from the insured establishing facts demonstrating lack of fault which are not rebutted by information in the insurer's file from which the insurer in good faith determines that the insured was substantially at fault.

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- c. In addition to the other provisions of this subparagraph, an insurer may not fail to renew a policy if the insured has had only one accident in which he or she was at fault within the current 3-year period. However, an insurer may nonrenew a policy for reasons other than accidents in accordance with s. 627.728. This subparagraph does not prohibit nonrenewal of a policy under which the insured has had three or more accidents, regardless of fault, during the most recent 3-year period.
 - 4. Imposing or requesting an additional premium for, or refusing to renew, a policy for motor vehicle insurance solely because the insured committed a noncriminal traffic infraction as described in s. 318.14 unless the infraction is:
 - a. A second infraction committed within an 18-month period, or a third or subsequent infraction committed within a 36-month period.
 - b. A violation of s. 316.183, when such violation is a result of exceeding the lawful speed limit by more than 15 miles per hour.
 - 5. Upon the request of the insured, the insurer and licensed agent shall supply to the insured the complete proof of fault or other criteria which justifies the additional charge or cancellation.
- 6. No insurer shall impose or request an additional premium for motor vehicle insurance, cancel or refuse to issue a policy, or refuse to renew a policy because the insured or the applicant is a handicapped or physically disabled person, so long as such handicap or physical disability does not substantially impair such person's mechanically assisted driving ability.

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- 7. No insurer may cancel or otherwise terminate any insurance contract or coverage, or require execution of a consent to rate endorsement, during the stated policy term for the purpose of offering to issue, or issuing, a similar or identical contract or coverage to the same insured with the same exposure at a higher premium rate or continuing an existing contract or coverage with the same exposure at an increased premium.
- 8. No insurer may issue a nonrenewal notice on any insurance contract or coverage, or require execution of a consent to rate endorsement, for the purpose of offering to issue, or issuing, a similar or identical contract or coverage to the same insured at a higher premium rate or continuing an existing contract or coverage at an increased premium without meeting any applicable notice requirements.
- 9. No insurer shall, with respect to premiums charged for motor vehicle insurance, unfairly discriminate solely on the basis of age, sex, marital status, or scholastic achievement.
- 10. Imposing or requesting an additional premium for motor vehicle comprehensive or uninsured motorist coverage solely because the insured was involved in a motor vehicle accident or was convicted of a moving traffic violation.
- 11. No insurer shall cancel or issue a nonrenewal notice on any insurance policy or contract without complying with any applicable cancellation or nonrenewal provision required under the Florida Insurance Code.
- 12. No insurer shall impose or request an additional premium, cancel a policy, or issue a nonrenewal notice on any insurance policy or contract because of any traffic infraction

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when adjudication has been withheld and no points have been assessed pursuant to s. 318.14(9) and (10). However, this subparagraph does not apply to traffic infractions involving accidents in which the insurer has incurred a loss due to the fault of the insured.

Section 33. Paragraph (a) of subsection (1) of section 626.989, Florida Statutes, is amended to read:

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

- (1) For the purposes of this section:
- (a) A person commits a "fraudulent insurance act" if the person:
- 1. Knowingly and with intent to defraud presents, causes to be presented, or prepares with knowledge or belief that it will be presented, to or by an insurer, self-insurer, self-insurance fund, servicing corporation, purported insurer, broker, or any agent thereof, any written statement as part of, or in support of, an application for the issuance of, or the rating of, any insurance policy, or a claim for payment or other benefit pursuant to any insurance policy, which the person knows to contain materially false information concerning any fact material thereto or if the person conceals, for the purpose of misleading another, information concerning any fact material thereto.
 - 2. Knowingly submits:
- a. A false, misleading, or fraudulent application or other document when applying for licensure as a health care clinic,

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seeking an exemption from licensure as a health care clinic, or demonstrating compliance with part X of chapter 400 with an intent to use the license, exemption from licensure, or demonstration of compliance to provide services or seek reimbursement under a motor vehicle liability insurance policy's medical payments coverage the Florida Motor Vehicle No-Fault Law.

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

Section 34. Subsection (1) of section 627.06501, Florida Statutes, is amended to read:

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

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

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exceed 10 percent, used by an insurer is presumed to be appropriate unless credible data demonstrates otherwise.

Section 35. Subsection (1) of section 627.0652, Florida Statutes, is amended to read:

627.0652 Insurance discounts for certain persons completing safety course.-

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

Section 36. Subsections (1), (3), and (6) of section 627.0653, Florida Statutes, are amended to read:

627.0653 Insurance discounts for specified motor vehicle equipment.-

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

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with the office must shall provide a premium discount if the insured vehicle is equipped with one or more air bags that which are factory installed.

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

Section 37. Section 627.4132, Florida Statutes, is amended to read:

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

- (1) To uninsured motorist coverage that which is separately governed by s. 627.727.
 - (2) To reduce the coverage available by reason of insurance



1606 policies insuring different named insureds. 1607 Section 38. Section 627.7263, Florida Statutes, is amended to read: 1608 1609 627.7263 Rental and leasing driver's insurance to be 1610 primary; exception.-1611 (1) The valid and collectible liability insurance and 1612 medical payments coverage or personal injury protection 1613 insurance providing coverage for the lessor of a motor vehicle 1614 for rent or lease is primary unless otherwise stated in at least 1615 10-point type on the face of the rental or lease agreement. Such

1616 insurance is primary for the limits of liability and personal 1617 injury protection coverage as required by s. 324.021(7) and 1618 medical payments coverage as required under s. 627.7265 ss.

324.021(7) and 627.736.

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

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"The valid and collectible liability insurance and 1625 medical payments coverage personal injury protection 1626 insurance of an any authorized rental or leasing 1627 driver is primary for the limits of liability and 1628 personal injury protection coverage and medical payments coverage required under ss. 324.021(7) and

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1630 Statutes."

627.7265 by ss. 324.021(7) and 627.736, Florida

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1632 Section 39. Section 627.7265, Florida Statutes, is created to read:

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627.7265 Motor vehicle insurance; medical payments



coverage.-

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- (1) MEDICAL PAYMENTS COVERAGE REQUIRED.—A motor vehicle liability insurance policy that is furnished as proof of financial responsibility pursuant to s. 324.031 must include medical payments coverage as provided in this section. The medical payments coverage must protect the named insured, resident relatives, persons operating the insured motor vehicle, passengers in the insured motor vehicle, and persons who are struck by the insured motor vehicle and suffer bodily injury while not an occupant of a self-propelled motor vehicle, to a limit of at least \$15,000 per person for medical expense incurred due to bodily injury, sickness, or disease arising out of the ownership, maintenance, or use of a motor vehicle. The medical payments coverage must also provide each such person with a death benefit of at least \$5,000. This section may not be construed to limit any other coverage made available by an insurer. An insurer may not offer medical payments coverage with a deductible to an applicant or policyholder.
- (2) REQUIRED BENEFITS.—Medical payments coverage must provide coverage for all of the following if medically necessary and the individual initially receives such treatment within 14 days after the motor vehicle accident:
- (a) Emergency transport and treatment by a provider licensed under chapter 401.
- (b) Emergency services and care provided by a hospital licensed under chapter 395.
- (c) Emergency services and care as defined in s. 395.002, provided in a facility licensed under chapter 395 and rendered by a physician or dentist, and related hospital inpatient



1664 services rendered by a physician or dentist. (d) Hospital inpatient services, other than emergency 1665 1666 services and care. 1667 (e) Hospital outpatient services, other than emergency 1668 services and care. 1669 (f) Physician services and care provided by a physician 1670 licensed under chapter 458 or chapter 459 or a chiropractic 1671 physician licensed under chapter 460, or dental services and 1672 care provided by a dentist licensed under chapter 466. 1673 (3) AUTHORIZED EXCLUSIONS.—Notwithstanding any other requirement in this section, an insurer may exclude medical 1674 1675 payment benefits: 1676 (a) For injury sustained by the named insured or a resident 1677 relative while occupying another motor vehicle owned by the 1678 named insured and not insured under the policy, unless such 1679 vehicle qualifies as a newly acquired vehicle or temporary 1680 substitute vehicle. 1681 (b) For injury sustained by any person operating the insured motor vehicle without the express or implied consent of 1682 1683 the insured. 1684 (c) For any person who intentionally causes injury to 1685 himself or herself. 1686 (d) For any person injured while committing a felony. 1687 (4) PAYMENT OF BENEFITS.— 1688 (a) Benefits due from an insurer under medical payments 1689 coverage are primary to any health insurance benefit of a person 1690 injured in a motor vehicle accident and apply to any coinsurance 1691 or deductible amount required by the injured person's health

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insurance policy, except that:

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- 1. Benefits received under any workers' compensation law must be credited against medical payments coverage benefits, and are due and payable as losses accrue, upon reasonable proof of such losses and the amount of expenses and losses incurred which are covered by the policy issued under this section.
- 2. When the Agency for Health Care Administration provides, pays for, or becomes liable for medical assistance under the Medicaid program which is related to injury, sickness, disease, or death arising out of the ownership, maintenance, or use of a motor vehicle, medical payments benefits are subject to the provisions of the Medicaid program, and, within 30 days after receiving notice that the Medicaid program paid such benefits, the insurer must repay the full amount of the benefits to the Medicaid program.
- (b) A medical payments insurance policy may include a provision allowing subrogation for medical payments benefits paid, if the expenses giving rise to the payments were caused by wrongful act or omission of another.
- (c) Upon receiving notice of an accident that is potentially covered by medical payments coverage benefits, the insurer must reserve \$2,500 of medical payments coverage benefits for payment to physicians licensed under chapter 458 or chapter 459 or dentists licensed under chapter 466 who provide emergency services and care, as defined in s. 395.002, or who provide hospital inpatient care. The amount required to be held in reserve may be used only to pay claims from such physicians or dentists until 30 days after the date the insurer receives notice of the accident. After the 30-day period, any amount of the reserve for which the insurer has not received notice of

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1722 such claims may be used by the insurer to pay other claims. This 1723 paragraph does not require an insurer to establish a claim 1724 reserve for insurance accounting purposes.

- (5) CHARGES FOR CARE OF INJURED PERSONS.—
- (a) A physician, hospital, clinic, or other person or institution lawfully providing medical care to an injured person for a bodily injury covered by medical payments coverage may charge the insurer and injured party only a reasonable amount pursuant to this section. However, such charges may not exceed the amount the person or institution customarily charges for like medical care. In determining whether a charge for a particular service, treatment, supply, or prescription is reasonable, consideration may be given to evidence of usual and customary charges and payments accepted by the provider involved in the dispute; reimbursement levels in the community and various federal and state medical fee schedules applicable to motor vehicle and other insurance coverages; and other information relevant to the reasonableness of the reimbursement for the service, treatment, supply, or prescription.
- 1. The insurer may limit reimbursement to the following schedule of maximum charges:
- a. For emergency transport and treatment by providers licensed under chapter 401, 200 percent of Medicare.
- b. For emergency services and care provided by a hospital licensed under chapter 395, 75 percent of the hospital's usual and customary charges.
- c. For emergency services and care, as defined in s. 395.002, provided in a facility licensed under chapter 395 and rendered by a physician or dentist, and related hospital



1751 inpatient services rendered by a physician or dentist, the usual 1752 and customary charges in the community. d. For hospital inpatient services other than emergency 1753 1754 services and care, 200 percent of the Medicare Part A 1755 prospective payment applicable to the specific hospital 1756 providing the inpatient services. 1757 e. For hospital outpatient services other than emergency 1758 services and care, 200 percent of the Medicare Part A Ambulatory 1759 Payment Classification for the specific hospital providing the 1760 outpatient services. f. For all other medical services, supplies, and care, 200 1761 1762 percent of the allowable amount under: 1763 (I) The participating physician fee schedule of Medicare 1764 Part B, except as provided in sub-sub-subparagraphs (II) and 1765 (III). 1766 (II) Medicare Part B, in the case of services, supplies, and care provided by ambulatory surgical centers and clinical 1767 1768 laboratories. 1769 (III) The Durable Medical Equipment Prosthetics/Orthotics and Supplies fee schedule of Medicare Part B, in the case of 1770 1771 durable medical equipment. 1772 However, if such services, supplies, or care is not reimbursable 1773 1774 under Medicare Part B as provided in this sub-subparagraph, the 1775 insurer may limit reimbursement to 80 percent of the maximum 1776 reimbursable allowance under workers' compensation. Services,

supplies, or care that is not reimbursable under Medicare or

workers' compensation is not required to be reimbursed by the

insurer.

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- 2. For purposes of subparagraph 1., the applicable fee schedule or payment limitation under Medicare is the fee schedule or payment limitation in effect on March 1 of the service year in which the services, supplies, or care is rendered and for the area in which the services, supplies, or care is rendered. The applicable fee schedule or payment limitation applies to services, supplies, or care rendered during that service year notwithstanding any subsequent change made to the fee schedule or payment limitation; however, it may not be less than the allowable amount under the applicable schedule of Medicare Part B for 2007 for medical services, supplies, and care subject to Medicare Part B. For purposes of this subparagraph, the term "service year" means the period from March 1 through the end of February of the following year.
- 3. For purposes of subparagraph 1., the applicable fee schedule or payment limitation under workers' compensation is determined under s. 440.13 and rules adopted thereunder which are in effect at the time such services, supplies, or care is provided.
- 4. Subparagraph 1. does not authorize the insurer to apply any limitation on the number of treatments or other utilization limits that apply under Medicare or workers' compensation. An insurer that applies the allowable payment limitations of subparagraph 1. must reimburse a provider who lawfully provided medical care under the scope of his or her license, regardless of whether the provider is entitled to reimbursement under Medicare or workers' compensation due to restrictions or limitations on the types or discipline of health care providers who may be reimbursed for particular procedures or procedure

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1809 codes. However, subparagraph 1. does not prohibit an insurer 1810 from using the Medicare coding policies and payment 1811 methodologies of the federal Centers for Medicare and Medicaid 1812 Services, including applicable modifiers, to determine the 1813 appropriate amount of reimbursement for medical services, 1814 supplies, or care, if the coding policy or payment methodology 1815 does not constitute a utilization limit.

- 5. If an insurer limits payment as authorized by subparagraph 1., the person providing such medical care may not bill or attempt to collect from the insured any amount in excess of such limits, except for amounts that are not covered by the insured's medical payments benefits due to the maximum policy limits.
- 6. An insurer may limit payment as authorized by this paragraph only if the insurance policy includes a notice at the time of issuance or renewal that the insurer may limit payment pursuant to the schedule of charges specified in this paragraph. A policy form approved by the office satisfies this requirement. If a provider submits a charge for an amount less than the amount allowed under subparagraph 1., the insurer may pay the amount of the charge submitted.
- (b) 1. An insurer or insured is not required to pay a claim or charges:
- a. For any service or treatment that was not lawful at the time rendered;
- b. To any person who knowingly submits a false or misleading statement relating to the claim or charges; or
- c. For any treatment or service that is upcoded or that is unbundled when the treatment or services should be bundled. To

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facilitate prompt payment of lawful services, an insurer may change codes that it determines have been improperly or incorrectly upcoded or unbundled and may make payment based on the changed codes, without affecting the right of the provider to dispute the change by the insurer, if, before doing so, the insurer contacts the health care provider and discusses the reasons for the insurer's change and the health care provider's reason for the coding, or makes a reasonable good faith effort to do so, as documented in the insurer's file.

2. The Department of Health, in consultation with the appropriate professional licensing boards, shall adopt by rule a list of diagnostic tests deemed not to be medically necessary for use in the treatment of persons sustaining bodily injury covered by medical payments benefits under this section. The list must be revised from time to time as determined by the Department of Health in consultation with the respective professional licensing boards. Inclusion of a test on the list must be based on a lack of demonstrated medical value and a level of general acceptance by the relevant provider community and may not be dependent on results based entirely upon subjective patient response. Notwithstanding its inclusion on a fee schedule in this subsection, an insurer or insured is not required to pay any charges or reimburse claims for an invalid diagnostic test as determined by the Department of Health.

(c) With respect to any medical care other than medical services billed by a hospital or other provider for emergency services and care, as defined in s. 395.002, or inpatient services rendered at a hospital-owned facility, the statement of charges must be furnished to the insurer by the provider.



1867 (d) All statements and bills for medical services rendered by a physician, hospital, clinic, or other person or institution 1868 1869 must be submitted to the insurer on a properly completed Centers 1870 for Medicare and Medicaid Services Form CMS-1500, a UB-92 form, 1871 or any other standard form approved by the office and adopted by 1872 the commission for purposes of this paragraph. All billings for 1873 such services rendered by providers must, to the extent 1874 applicable, comply with the Form CMS-1500 instructions, the 1875 codes established by the American Medical Association's Current 1876 Procedural Terminology Editorial Panel, and the Healthcare 1877 Common Procedure Coding System (HCPCS) and must follow the 1878 Physicians' Current Procedural Terminology (CPT), the HCPCS in 1879 effect for the year in which services are rendered, and the 1880 International Classification of Diseases adopted by the United 1881 States Department of Health and Human Services in effect for the 1882 year in which services are rendered. The quidance for 1883 determining compliance with applicable CPT and HCPCS coding must 1884 be provided by the CPT or the HCPCS in effect for the year in which services were rendered, the Office of the Inspector 1885 1886 General, Physicians Compliance Guidelines, and other 1887 authoritative treatises designated by rule by the Agency for Health Care Administration. A statement of medical services may 1888 1889 not include charges for medical services of a person or entity that performed such services without possessing the valid 1890 1891 licenses required to perform such services. 1892 (6) CIVIL ACTION FOR INSURANCE FRAUD.—An insurer has a 1893 cause of action against any person convicted of, or who, 1894 regardless of adjudication of guilt, pleads guilty or nolo contendere to, insurance fraud under s. 817.234, patient 1895

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brokering under s. 817.505, or kickbacks under s. 456.054, associated with a claim for medical payments coverage benefits in accordance with this section. An insurer prevailing in an action brought under this subsection may recover compensatory, consequential, and punitive damages subject to the requirements and limitations of part II of chapter 768 and attorney fees and costs incurred in litigating a cause of action against any person convicted of, or who, regardless of adjudication of guilt, pleads guilty or nolo contendere to, insurance fraud under s. 817.234, patient brokering under s. 817.505, or kickbacks under s. 456.054, associated with a claim for medical payments coverage benefits in accordance with this section.

- (7) FRAUD ADVISORY NOTICE. Upon receiving notice of a claim under this section, an insurer shall provide a notice to the insured or to a person for whom a claim for reimbursement for diagnosis or treatment of injuries has been filed, advising that:
- (a) Pursuant to s. 626.9892, the department may pay rewards of up to \$25,000 to persons who provide information leading to the arrest and conviction of persons committing crimes investigated by the Division of Investigative and Forensic Services arising from violations of s. 440.105, s. 624.15, s. 626.9541, s. 626.989, or s. 817.234.
- (b) Solicitation of a person injured in a motor vehicle crash for purposes of filing medical payments coverage or tort claims could be a violation of s. 817.234, s. 817.505, or the rules regulating The Florida Bar and should be immediately reported to the Division of Investigative and Forensic Services if such conduct has taken place.

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- (8) NONREIMBURSABLE CLAIMS.—Claims generated as a result of activities that are unlawful pursuant to s. 817.505 are not reimbursable.
 - (9) SECURE ELECTRONIC DATA TRANSFER.—A notice, documentation, transmission, or communication of any kind required or authorized under this section may be transmitted electronically if it is transmitted by secure electronic data transfer that is consistent with state and federal privacy and security laws.

Section 40. Subsections (1) and (7) of section 627.727, Florida Statutes, are amended, and present subsections (8), (9), and (10) of that section are redesignated as subsections (7), (8), and (9), respectively, to read:

- 627.727 Motor vehicle insurance; uninsured and underinsured vehicle coverage; insolvent insurer protection.-
- (1) A $\frac{1}{100}$ motor vehicle liability insurance policy that which provides bodily injury liability coverage may not shall be delivered or issued for delivery in this state with respect to any specifically insured or identified motor vehicle registered or principally garaged in this state, unless uninsured motor vehicle coverage is provided therein or supplemental thereto for the protection of persons insured thereunder who are legally entitled to recover damages from owners or operators of uninsured motor vehicles because of bodily injury, sickness, or disease, including death, resulting therefrom. However, the coverage required under this section is not applicable if when, or to the extent that, an insured named in the policy makes a written rejection of the coverage on behalf of all insureds under the policy. If When a motor vehicle is leased for a period

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of 1 year or longer and the lessor of such vehicle, by the terms of the lease contract, provides liability coverage on the leased vehicle, the lessee of such vehicle has shall have the sole privilege to reject uninsured motorist coverage or to select lower limits than the bodily injury liability limits, regardless of whether the lessor is qualified as a self-insurer pursuant to s. 324.171. Unless an insured, or lessee having the privilege of rejecting uninsured motorist coverage, requests such coverage or requests higher uninsured motorist limits in writing, the coverage or such higher uninsured motorist limits need not be provided in or supplemental to any other policy which renews, extends, changes, supersedes, or replaces an existing policy with the same bodily injury liability limits when an insured or lessee had rejected the coverage. When an insured or lessee has initially selected limits of uninsured motorist coverage lower than her or his bodily injury liability limits, higher limits of uninsured motorist coverage need not be provided in or supplemental to any other policy that which renews, extends, changes, supersedes, or replaces an existing policy with the same bodily injury liability limits unless an insured requests higher uninsured motorist coverage in writing. The rejection or selection of lower limits must shall be made on a form approved by the office. The form must shall fully advise the applicant of the nature of the coverage and must shall state that the coverage is equal to bodily injury liability limits unless lower limits are requested or the coverage is rejected. The heading of the form must shall be in 12-point bold type and must shall state: "You are electing not to purchase certain valuable coverage that which protects you and your family or you are

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purchasing uninsured motorist limits less than your bodily injury liability limits when you sign this form. Please read carefully." If this form is signed by a named insured, it will be conclusively presumed that there was an informed, knowing rejection of coverage or election of lower limits on behalf of all insureds. The insurer shall notify the named insured at least annually of her or his options as to the coverage required by this section. Such notice must shall be part of, and attached to, the notice of premium, must shall provide for a means to allow the insured to request such coverage, and must shall be given in a manner approved by the office. Receipt of this notice does not constitute an affirmative waiver of the insured's right to uninsured motorist coverage if where the insured has not signed a selection or rejection form. The coverage described under this section must shall be over and above, but may shall not duplicate, the benefits available to an insured under any workers' compensation law, personal injury protection benefits, disability benefits law, or similar law; under any automobile medical payments expense coverage; under any motor vehicle liability insurance coverage; or from the owner or operator of the uninsured motor vehicle or any other person or organization jointly or severally liable together with such owner or operator for the accident; and such coverage must shall cover the difference, if any, between the sum of such benefits and the damages sustained, up to the maximum amount of such coverage provided under this section. The amount of coverage available under this section may shall not be reduced by a setoff against any coverage, including liability insurance. Such coverage does shall not inure directly or indirectly to the benefit of any

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workers' compensation or disability benefits carrier or any person or organization qualifying as a self-insurer under any workers' compensation or disability benefits law or similar law.

(7) The legal liability of an uninsured motorist coverage insurer does not include damages in tort for pain, suffering, mental anguish, and inconvenience unless the injury or disease is described in one or more of paragraphs (a) - (d) of s. 627.737(2).

Section 41. Subsection (1) and paragraphs (a) and (b) of subsection (2) of section 627.7275, Florida Statutes, are amended to read:

627.7275 Motor vehicle liability.-

- (1) A motor vehicle insurance policy providing personal injury protection as set forth in s. 627.736 may not be delivered or issued for delivery in this state for a with respect to any specifically insured or identified motor vehicle registered or principally garaged in this state must provide bodily injury liability coverage and unless the policy also provides coverage for property damage liability coverage as required under by s. 324.022, and medical payments coverage as required under s. 627.7265.
- (2)(a) Insurers writing motor vehicle insurance in this state shall make available, subject to the insurers' usual underwriting restrictions:
- 1. Coverage under policies as described in subsection (1) to an applicant for private passenger motor vehicle insurance coverage who is seeking the coverage in order to reinstate the applicant's driving privileges in this state if the driving privileges were revoked or suspended pursuant to s. 316.646 or

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- s. 324.0221 due to the failure of the applicant to maintain required security.
- 2. Coverage under policies as described in subsection (1), which includes bodily injury also provides liability coverage and property damage liability coverage for bodily injury, death, and property damage arising out of the ownership, maintenance, or use of the motor vehicle in an amount not less than the minimum limits required under described in s. 324.021(7) or s. 324.023 and which conforms to the requirements of s. 324.151, to an applicant for private passenger motor vehicle insurance coverage who is seeking the coverage in order to reinstate the applicant's driving privileges in this state after such privileges were revoked or suspended under s. 316.193 or s. 322.26(2) for driving under the influence.
- (b) The policies described in paragraph (a) must shall be issued for at least 6 months and, as to the minimum coverages required under this section, may not be canceled by the insured for any reason or by the insurer after 60 days, during which period the insurer is completing the underwriting of the policy. After the insurer has completed underwriting the policy, the insurer shall notify the Department of Highway Safety and Motor Vehicles that the policy is in full force and effect and is not cancelable for the remainder of the policy period. A premium must shall be collected and the coverage is in effect for the 60-day period during which the insurer is completing the underwriting of the policy, whether or not the person's driver license, motor vehicle tag, and motor vehicle registration are in effect. Once the noncancelable provisions of the policy become effective, the bodily injury liability and property

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damage liability coverages for bodily injury, property damage, and personal injury protection may not be reduced below the minimum limits required under s. 324.021 or s. 324.023 during the policy period, and the medical payments coverage may not be reduced below the minimum limit required under s. 627.7265.

Section 42. Paragraph (a) of subsection (1) of section 627.728, Florida Statutes, is amended to read:

- 627.728 Cancellations; nonrenewals.-
- (1) As used in this section, the term:
- (a) "Policy" means the bodily injury and property damage liability, personal injury protection, medical payments, comprehensive, collision, and uninsured motorist coverage portions of a policy of motor vehicle insurance delivered or issued for delivery in this state:
- 1. Insuring a natural person as named insured or one or more related individuals who are residents resident of the same household; and
- 2. Insuring only a motor vehicle of the private passenger type or station wagon type which is not used as a public or livery conveyance for passengers or rented to others; or insuring any other four-wheel motor vehicle having a load capacity of 1,500 pounds or less which is not used in the occupation, profession, or business of the insured other than farming; other than any policy issued under an automobile insurance assigned risk plan or covering garage, automobile sales agency, repair shop, service station, or public parking place operation hazards.

The term "policy" does not include a binder as defined in s.

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2099 627.420 unless the duration of the binder period exceeds 60 2100 days.

Section 43. Subsection (1), paragraph (a) of subsection (5), and subsections (6) and (7) of section 627.7295, Florida Statutes, are amended to read:

627.7295 Motor vehicle insurance contracts.

- (1) As used in this section, the term:
- (a) "Policy" means a motor vehicle insurance policy that provides bodily injury liability personal injury protection coverage, property damage liability coverage, and medical payments coverage or both.
- (b) "Binder" means a binder that provides motor vehicle bodily injury liability coverage, personal injury protection and property damage liability coverage, and medical payments coverage.
- (5)(a) A licensed general lines agent may charge a perpolicy fee up to not to exceed \$10 to cover the administrative costs of the agent associated with selling the motor vehicle insurance policy if the policy covers only bodily injury liability coverage, personal injury protection coverage as provided by s. 627.736 and property damage liability coverage, and medical payments coverage as provided by s. 627.7275 and if no other insurance is sold or issued in conjunction with or collateral to the policy. The fee is not considered part of the premium.
- (6) If a motor vehicle owner's driver license, license plate, and registration have previously been suspended pursuant to s. 316.646 or s. 627.733, an insurer may cancel a new policy only as provided in s. 627.7275.

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- (7) A policy of private passenger motor vehicle insurance or a binder for such a policy may be initially issued in this state only if, before the effective date of such binder or policy, the insurer or agent has collected from the insured an amount equal to 2 months' premium from the insured. An insurer, agent, or premium finance company may not, directly or indirectly, take any action that results resulting in the insured paying having paid from the insured's own funds an amount less than the 2 months' premium required by this subsection. This subsection applies without regard to whether the premium is financed by a premium finance company or is paid pursuant to a periodic payment plan of an insurer or an insurance agent.
 - (a) This subsection does not apply:
- 1. If an insured or member of the insured's family is renewing or replacing a policy or a binder for such policy written by the same insurer or a member of the same insurer group. This subsection does not apply
- 2. To an insurer that issues private passenger motor vehicle coverage primarily to active duty or former military personnel or their dependents. This subsection does not apply
- 3. If all policy payments are paid pursuant to a payroll deduction plan, an automatic electronic funds transfer payment plan from the policyholder, or a recurring credit card or debit card agreement with the insurer.
 - (b) This subsection and subsection (4) do not apply if:
- 1. All policy payments to an insurer are paid pursuant to an automatic electronic funds transfer payment plan from an agent, a managing general agent, or a premium finance company

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and if the policy includes, at a minimum, bodily injury liability coverage, personal injury protection pursuant to ss. 627.730-627.7405; motor vehicle property damage liability coverage, and medical payments coverage pursuant to s. 627.7275; or and bodily injury liability in at least the amount of \$10,000 because of bodily injury to, or death of, one person in any one accident and in the amount of \$20,000 because of bodily injury to, or death of, two or more persons in any one accident. This subsection and subsection (4) do not apply if

2. An insured has had a policy in effect for at least 6 months, the insured's agent is terminated by the insurer that issued the policy, and the insured obtains coverage on the policy's renewal date with a new company through the terminated agent.

Section 44. Subsections (1) and (2) of section 627.7415, Florida Statutes, are amended to read:

627.7415 Commercial motor vehicles; additional liability insurance coverage. - Commercial motor vehicles, as defined in s. 207.002 or s. 320.01, operated upon the roads and highways of this state shall be insured with the following minimum levels of combined bodily liability insurance and property damage liability insurance under subsections (1) and (2) in addition to any other insurance requirements. +

- (1) Fifty thousand dollars per occurrence For a commercial motor vehicle with a gross vehicle weight of 26,000 pounds or more, but less than 35,000 pounds:
- (a) Beginning January 1, 2019, through December 31, 2020, no less than \$50,000 per occurrence.
 - (b) Beginning January 1, 2021, through December 31, 2022,



2186 no less than \$60,000 per occurrence. (c) Beginning January 1, 2023, and thereafter, no less than 2187 2188 \$70,000 per occurrence. 2189 (2) One hundred thousand dollars per occurrence For a 2190 commercial motor vehicle with a gross vehicle weight of 35,000 2191 pounds or more, but less than 44,000 pounds: 2192 (a) Beginning January 1, 2019, through December 31, 2020, 2193 no less than \$100,000 per occurrence. 2194 (b) Beginning January 1, 2021, through December 31, 2022, no less than \$120,000 per occurrence. 2195 2196 (c) Beginning January 1, 2023, and thereafter, no less than 2197 \$140,000 per occurrence. 2198 2199 A violation of this section is a noncriminal traffic infraction, 2200 punishable as a nonmoving violation as provided in chapter 318. 2201 Section 45. Section 627.8405, Florida Statutes, is amended 2202 to read: 2203 627.8405 Prohibited acts; financing companies.—A No premium 2204 finance company shall, in a premium finance agreement or other 2205 agreement, may not finance the cost of or otherwise provide for 2206 the collection or remittance of dues, assessments, fees, or 2207 other periodic payments of money for the cost of: 2208 (1) A membership in an automobile club. The term 2209 "automobile club" means a legal entity that which, in 2210 consideration of dues, assessments, or periodic payments of 2211 money, promises its members or subscribers to assist them in 2212 matters relating to the ownership, operation, use, or 2213 maintenance of a motor vehicle; however, the term this

definition of "automobile club" does not include persons,

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associations, or corporations which are organized and operated solely for the purpose of conducting, sponsoring, or sanctioning motor vehicle races, exhibitions, or contests upon racetracks, or upon racecourses established and marked as such for the duration of such particular events. The term words "motor vehicle" used herein has have the same meaning as defined in chapter 320.

- (2) An accidental death and dismemberment policy sold in combination with a policy providing only medical payments coverage, bodily injury liability coverage, personal injury protection and property damage liability coverage only policy.
- (3) Any product not regulated under the provisions of this insurance code.

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

Section 46. Subsection (1) of section 627.915, Florida Statutes, is amended to read:

627.915 Insurer experience reporting.

(1) Each insurer transacting private passenger automobile insurance in this state shall report certain information annually to the office. The information will be due on or before July 1 of each year. The information must shall be divided into the following categories: bodily injury liability; property damage liability; uninsured motorist; personal injury protection benefits; medical payments; and comprehensive and collision. The

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information given must shall be on direct insurance writings in the state alone and shall represent total limits data. The information set forth in paragraphs (a)-(f) is applicable to voluntary private passenger and Joint Underwriting Association private passenger writings and must shall be reported for each of the latest 3 calendar-accident years, with an evaluation date of March 31 of the current year. The information set forth in paragraphs (q) - (j) is applicable to voluntary private passenger writings and must shall be reported on a calendar-accident year basis ultimately seven times at seven different stages of development.

- (a) Premiums earned for the latest 3 calendar-accident vears.
- (b) Loss development factors and the historic development of those factors.
 - (c) Policyholder dividends incurred.
 - (d) Expenses for other acquisition and general expense.
- (e) Expenses for agents' commissions and taxes, licenses, and fees.
- (f) Profit and contingency factors as utilized in the insurer's automobile rate filings for the applicable years.
 - (q) Losses paid.
 - (h) Losses unpaid.
 - (i) Loss adjustment expenses paid.
 - (j) Loss adjustment expenses unpaid.
- 2269 Section 47. Subsections (2) and (3) of section 628.909, 2270 Florida Statutes, are amended to read:
 - 628.909 Applicability of other laws.-
 - (2) The following provisions of the Florida Insurance Code



2273 apply to captive insurance companies who are not industrial 2274 insured captive insurance companies to the extent that such provisions are not inconsistent with this part: 2275

- (a) Chapter 624, except for ss. 624.407, 624.408, 624.4085, 624.40851, 624.4095, 624.411, 624.425, and 624.426.
 - (b) Chapter 625, part II.
 - (c) Chapter 626, part IX.
- (d) Sections 627.730-627.7405, when no-fault coverage is provided.
 - (e) Chapter 628.

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- (3) The following provisions of the Florida Insurance Code shall apply to industrial insured captive insurance companies to the extent that such provisions are not inconsistent with this part:
- (a) Chapter 624, except for ss. 624.407, 624.408, 624.4085, 624.40851, 624.4095, 624.411, 624.425, 624.426, and 624.609(1).
- (b) Chapter 625, part II, if the industrial insured captive insurance company is incorporated in this state.
 - (c) Chapter 626, part IX.
- (d) Sections 627.730-627.7405 when no-fault coverage is provided.
- 2294 (e) Chapter 628, except for ss. 628.341, 628.351, and 2295 628.6018.
 - Section 48. Subsections (2), (6), and (7) of section 705.184, Florida Statutes, are amended to read:
- 2298 705.184 Derelict or abandoned motor vehicles on the 2299 premises of public-use airports.-
 - (2) The airport director or the director's designee shall contact the Department of Highway Safety and Motor Vehicles to

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

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(6) The airport pursuant to this section or, if used, a

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

- (7) (a) For the purpose of perfecting its lien under this section, the airport shall record a claim of lien which states shall state:
 - 1. The name and address of the airport.
- 2. The name of the owner of the motor vehicle, the insurance company insuring the motor vehicle, notwithstanding the provisions of s. 627.736, and all persons of record claiming a lien against the motor vehicle.
- 3. The costs incurred from reasonable towing, storage, and parking fees, if any.
- 4. A description of the motor vehicle sufficient for identification.
 - (b) The claim of lien must shall be signed and sworn to or



2360	affirmed by the airport director or the director's designee.	
2361	(c) The claim of lien <u>is</u> shall be sufficient if it is in	
2362	substantially the following form:	
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2364	CLAIM OF LIEN	
2365	State of	
2366	County of	
2367	Before me, the undersigned notary public, personally appeared	
2368	, who was duly sworn and says that he/she is the	
2369	of, whose address is; and that the	
2370	following described motor vehicle:	
2371	(Description of motor vehicle)	
2372	owned by, whose address is, has accrued	
2373	\$ in fees for a reasonable tow, for storage, and for	
2374	parking, if applicable; that the lienor served its notice to the	
2375	owner, the insurance company insuring the motor vehicle	
2376	notwithstanding the provisions of s. 627.736, Florida Statutes,	
2377	and all persons of record claiming a lien against the motor	
2378	vehicle on,(year), by	
2379	(Signature)	
2380	Sworn to (or affirmed) and subscribed before me this day of	
2381	,(year), by(name of person making statement)	
2382	(Signature of Notary Public)(Print, Type, or Stamp	
2383	Commissioned name of Notary Public)	
2384	Personally KnownOR Producedas identification.	
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2386	However, the negligent inclusion or omission of any information	
2387	in this claim of lien which does not prejudice the owner does	
2388	not constitute a default that operates to defeat an otherwise	
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2389 valid lien.

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- (d) The claim of lien must shall be served on the owner of the motor vehicle, the insurance company insuring the motor vehicle, notwithstanding the provisions of s. 627.736, and all persons of record claiming a lien against the motor vehicle. If attempts to notify the owner, the insurance company insuring the motor vehicle notwithstanding the provisions of s. 627.736, or lienholders are not successful, the requirement of notice by mail shall be considered met. The claim of lien must shall be so served before recordation.
- (e) The claim of lien must shall be recorded with the clerk of court in the county where the airport is located. The recording of the claim of lien shall be constructive notice to all persons of the contents and effect of such claim. The lien attaches shall attach at the time of recordation and takes shall take priority as of that time.

Section 49. Subsection (4) of section 713.78, Florida Statutes, is amended to read:

- 713.78 Liens for recovering, towing, or storing vehicles and vessels.-
- (4)(a) Any person regularly engaged in the business of recovering, towing, or storing vehicles or vessels who comes into possession of a vehicle or vessel pursuant to subsection (2), and who claims a lien for recovery, towing, or storage services, shall give notice to the registered owner, the insurance company insuring the vehicle notwithstanding the provisions of s. 627.736, and to all persons claiming a lien thereon, as disclosed by the records in the Department of Highway Safety and Motor Vehicles or as disclosed by the records

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of any corresponding agency in any other state in which the vehicle is identified through a records check of the National Motor Vehicle Title Information System or an equivalent commercially available system as being titled or registered.

- (b) If a Whenever any law enforcement agency authorizes the removal of a vehicle or vessel or if a whenever any towing service, garage, repair shop, or automotive service, storage, or parking place notifies the law enforcement agency of possession of a vehicle or vessel pursuant to s. 715.07(2)(a)2., the law enforcement agency of the jurisdiction where the vehicle or vessel is stored shall contact the Department of Highway Safety and Motor Vehicles, or the appropriate agency of the state of registration, if known, within 24 hours through the medium of electronic communications, giving the full description of the vehicle or vessel. Upon receipt of the full description of the vehicle or vessel, the department shall search its files to determine the owner's name, the insurance company insuring the vehicle or vessel, and whether any person has filed a lien upon the vehicle or vessel as provided in s. 319.27(2) and (3) and notify the applicable law enforcement agency within 72 hours. The person in charge of the towing service, garage, repair shop, or automotive service, storage, or parking place shall obtain such information from the applicable law enforcement agency within 5 days after the date of storage and shall give notice pursuant to paragraph (a). The department may release the insurance company information to the requestor notwithstanding the provisions of s. 627.736.
- (c) Notice by certified mail must shall be sent within 7 business days after the date of storage of the vehicle or vessel

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

(d) If attempts to locate the name and address of the owner or lienholder prove unsuccessful, the towing-storage operator must shall, after 7 working days, excluding Saturday and Sunday, of the initial tow or storage, notify the public agency of jurisdiction where the vehicle or vessel is stored in writing by certified mail or acknowledged hand delivery that the towingstorage company has been unable to locate the name and address of the owner or lienholder and a physical search of the vehicle or vessel has disclosed no ownership information and a good faith effort has been made, including records checks of the Department of Highway Safety and Motor Vehicles database and the National Motor Vehicle Title Information System or an equivalent commercially available system. As used in For purposes of this paragraph and subsection (9), the term "good faith effort" means that the following checks have been performed by the company to

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establish prior state of registration and for title:

- 1. Check of the Department of Highway Safety and Motor Vehicles database for the owner and any lienholder.
- 2. Check of the electronic National Motor Vehicle Title Information System or an equivalent commercially available system to determine the state of registration when there is not a current registration record for the vehicle on file with the Department of Highway Safety and Motor Vehicles.
- 3. Check of vehicle or vessel for any type of tag, tag record, temporary tag, or regular tag.
- 4. Check of law enforcement report for tag number or other information identifying the vehicle or vessel, if the vehicle or vessel was towed at the request of a law enforcement officer.
- 5. Check of trip sheet or tow ticket of tow truck operator to see if a tag was on vehicle or vessel at beginning of tow, if private tow.
- 6. If there is no address of the owner on the impound report, check of law enforcement report to see if an out-ofstate address is indicated from driver license information.
- 7. Check of vehicle or vessel for inspection sticker or other stickers and decals that may indicate a state of possible registration.
- 8. Check of the interior of the vehicle or vessel for any papers that may be in the glove box, trunk, or other areas for a state of registration.
 - 9. Check of vehicle for vehicle identification number.
 - 10. Check of vessel for vessel registration number.
- 11. Check of vessel hull for a hull identification number which should be carved, burned, stamped, embossed, or otherwise

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permanently affixed to the outboard side of the transom or, if there is no transom, to the outmost seaboard side at the end of the hull that bears the rudder or other steering mechanism.

Section 50. Paragraph (a) of subsection (1), paragraph (c) of subsection (7), paragraphs (a), (b), and (c) of subsection (8), and subsections (9) and (10) of section 817.234, Florida Statutes, are amended to read:

817.234 False and fraudulent insurance claims.

- (1) (a) A person commits insurance fraud punishable as provided in subsection (11) if that person, with the intent to injure, defraud, or deceive any insurer:
- 1. Presents or causes to be presented any written or oral statement as part of, or in support of, a claim for payment or other benefit pursuant to an insurance policy or a health maintenance organization subscriber or provider contract, knowing that such statement contains any false, incomplete, or misleading information concerning any fact or thing material to such claim;
- 2. Prepares or makes any written or oral statement that is intended to be presented to an any insurer in connection with, or in support of, any claim for payment or other benefit pursuant to an insurance policy or a health maintenance organization subscriber or provider contract, knowing that such statement contains any false, incomplete, or misleading information concerning any fact or thing material to such claim;
- 3.a. Knowingly presents, causes to be presented, or prepares or makes with knowledge or belief that it will be presented to an any insurer, purported insurer, servicing corporation, insurance broker, or insurance agent, or any

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employee or agent thereof, any false, incomplete, or misleading information or a written or oral statement as part of, or in support of, an application for the issuance of, or the rating of, any insurance policy, or a health maintenance organization subscriber or provider contract; or

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

(7)

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

(8)(a) It is unlawful for any person intending to defraud any other person to solicit or cause to be solicited any

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business from a person involved in a motor vehicle accident for the purpose of making, adjusting, or settling motor vehicle tort claims or claims for benefits under medical payments coverage in a motor vehicle insurance policy personal injury protection benefits required by s. 627.736. Any person who violates the provisions of this paragraph commits a felony of the second degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084. A person who is convicted of a violation of this subsection shall be sentenced to a minimum term of imprisonment of 2 years.

- (b) A person may not solicit or cause to be solicited any business from a person involved in a motor vehicle accident by any means of communication other than advertising directed to the public for the purpose of making motor vehicle tort claims or claims for benefits under medical payments coverage in a motor vehicle insurance policy personal injury protection benefits required by s. 627.736, within 60 days after the occurrence of the motor vehicle accident. Any person who violates this paragraph commits a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.
- (c) A lawyer, health care practitioner as defined in s. 456.001, or owner or medical director of a clinic required to be licensed pursuant to s. 400.9905 may not, at any time after 60 days have elapsed from the occurrence of a motor vehicle accident, solicit or cause to be solicited any business from a person involved in a motor vehicle accident by means of in person or telephone contact at the person's residence, for the purpose of making motor vehicle tort claims or claims for benefits under medical payments coverage in a motor vehicle

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insurance policy personal injury protection benefits required by s. 627.736. Any person who violates this paragraph commits a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.

- (9) A person may not organize, plan, or knowingly participate in an intentional motor vehicle crash or a scheme to create documentation of a motor vehicle crash that did not occur for the purpose of making motor vehicle tort claims or claims for benefits under medical payments coverage in a motor vehicle insurance policy personal injury protection benefits as required by s. 627.736. Any person who violates this subsection commits a felony of the second degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084. A person who is convicted of a violation of this subsection shall be sentenced to a minimum term of imprisonment of 2 years.
- (10) A licensed health care practitioner who is found guilty of insurance fraud under this section for an act relating to a motor vehicle personal injury protection insurance policy loses his or her license to practice for 5 years and may not receive reimbursement under medical payments coverage in a motor vehicle insurance policy for personal injury protection benefits for 10 years.

Section 51. Applicability and construction; notice to policyholders.-

(1) As used in this section, the term "minimum security requirements" means security that enables a person to respond in damages for liability on account of crashes arising out of the ownership, maintenance, or use of a motor vehicle in the amounts required by s. 324.021(7), Florida Statutes.



2621 (2) Effective January 1, 2019: 2622 (a) Motor vehicle insurance policies issued or renewed on 2623 or after that date may not include personal injury protection. 2624 (b) All persons subject to s. 324.022, s. 324.032, s. 2625 627.7415, or s. 627.742, Florida Statutes, must maintain at 2626 least minimum security requirements. 2627 (c) Any new or renewal motor vehicle insurance policy 2628 delivered or issued for delivery in this state must provide 2629 coverage that complies with minimum security requirements. 2630 (d) Any new or renewal motor vehicle insurance policy 2631 furnished to an owner or operator of a motor vehicle as proof of 2632 financial responsibility pursuant to s. 324.022 or s. 324.031, 2633 Florida Statutes, must provide medical payments coverage that 2634 complies with s. 627.7265, Florida Statutes. 2635 (e) An existing motor vehicle insurance policy issued before that date which provides personal injury protection and 2636 2637 property damage liability coverage that meets the requirements of s. 324.022, Florida Statutes, on December 31, 2018, but which 2638 does not meet minimum security requirements on or after January 2639 2640 1, 2019, is deemed to meet the security requirements of s. 2641 324.022, Florida Statutes, and the medical payments coverage requirements of s. 627.7265, Florida Statutes, until such policy 2642 2643 is renewed, nonrenewed, or canceled on or after January 1, 2019. 2644 (3) Each insurer shall allow each insured who has a new or 2645 renewal policy providing personal injury protection, which 2646 becomes effective before January 1, 2019, and whose policy does 2647 not meet minimum security requirements on or after January 1, 2648 2019, to change coverages so as to eliminate personal injury protection and obtain coverage providing minimum security 2649

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requirements, which shall be effective on or after January 1, 2019. The insurer is not required to provide coverage complying with minimum security requirements in such policies if the insured does not pay the required premium, if any, by January 1, 2019, or such later date as the insurer may allow. Any reduction in the premium must be refunded by the insurer. The insurer may not impose on the insured an additional fee or charge that applies solely to a change in coverage; however, the insurer may charge an additional required premium that is actuarially indicated.

- (4) By September 1, 2018, each motor vehicle insurer shall provide notice of this section to each motor vehicle policyholder who is subject to this section. The notice is subject to approval by the Office of Insurance Regulation and must clearly inform the policyholder that:
- (a) The Florida Motor Vehicle No-Fault Law is repealed, effective January 1, 2019, and that on or after that date, the insured is no longer required to maintain personal injury protection insurance coverage, that personal injury protection coverage is no longer available for purchase in this state, and that all new or renewal policies issued on or after that date do not contain such coverage.
- (b) Effective January 1, 2019, a person subject to the financial responsibility requirements of s. 324.022, Florida Statutes, must maintain minimum security requirements that enable the person to respond in damages for liability on account of accidents arising out of the use of a motor vehicle in the following amounts:
 - 1. Beginning January 1, 2019, and continuing through



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- a. Twenty thousand dollars for bodily injury to, or the death of, one person in any one crash and, subject to such limits for one person, in the amount of \$40,000 for bodily injury to, or the death of, two or more persons in any one crash; and
- b. Ten thousand dollars for damage to, or destruction of, the property of others in any one crash.
- 2. Beginning January 1, 2021, and continuing through December 31, 2022:
- a. Twenty-five thousand dollars for bodily injury to, or the death of, one person in any one crash and, subject to such limits for one person, in the amount of \$50,000 for bodily injury to, or the death of, two or more persons in any one crash; and
- b. Ten thousand dollars for damage to, or destruction of, the property of others in any one crash.
 - 3. Beginning January 1, 2023, and continuing thereafter:
- a. Thirty thousand dollars for bodily injury to, or the death of, one person in any one crash and, subject to such limits for one person, in the amount of \$60,000 for bodily injury to, or the death of, two or more persons in any one crash; and
- b. Ten thousand dollars for damage to, or destruction of, the property of others in any one crash.
- (c) Personal injury protection insurance paid covered medical expenses for injuries sustained in a motor vehicle crash by the policyholder, passengers, and relatives residing in the policyholder's household.

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- (d) Bodily injury liability coverage protects the insured, up to the coverage limits, against loss if the insured is legally responsible for the death of or bodily injury to others in a motor vehicle accident.
- (e) Effective January 1, 2019, a person who purchases a motor vehicle liability insurance policy as proof of financial responsibility must maintain medical payments coverage that complies with s. 627.7265, Florida Statutes. Medical payments coverage pays covered medical expenses, up to the limits of such coverage, for injuries sustained in a motor vehicle crash by the policyholder, passengers, and relatives residing in the policyholder's household, as provided in s. 627.7265, Florida Statutes. Medical payments coverage also provides a death benefit of at least \$5,000. Medical payments coverage provides reimbursement for the following if medically necessary and if an individual initially receives such treatment within 14 days after the motor vehicle accident:
 - 1. Emergency transportation and treatment.
 - 2. Emergency services and care provided by a hospital.
- 3. Emergency services and care provided by a licensed physician or licensed dentist in a hospital, ambulatory surgical center, or mobile surgical facility licensed under chapter 395, Florida Statutes, and related hospital inpatient care.
- 4. Hospital inpatient services, other than emergency services and care.
- 5. Hospital outpatient services, other than emergency services and care.
- 6. Physician services and care provided by a physician licensed under chapter 458 or chapter 459, Florida Statutes, or

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by a chiropractic physician licensed under chapter 460, Florida Statutes, or dental services and care provided by a dentist licensed under chapter 466, Florida Statutes.

- (f) The policyholder may obtain underinsured motorist coverage, which provides benefits, up to the limits of such coverage, to a policyholder or other insured entitled to recover damages for bodily injury, sickness, disease, or death resulting from a motor vehicle accident with an uninsured or underinsured owner or operator of a motor vehicle.
- (q) If the policyholder's new or renewal motor vehicle insurance policy is effective before January 1, 2019, and contains personal injury protection and property damage liability coverage as required by state law before January 1, 2019, but does not meet minimum security requirements on or after January 1, 2019, the policy is deemed to meet minimum security requirements until it is renewed, nonrenewed, or canceled on or after January 1, 2019.
- (h) A policyholder whose new or renewal policy becomes effective before January 1, 2019, but does not meet minimum security requirements on or after January 1, 2019, may change coverages under the policy so as to eliminate personal injury protection and to obtain coverage providing minimum security requirements, including bodily injury liability coverage, which are effective on or after January 1, 2019.
- (i) If the policyholder has any questions, he or she should contact the person named at the telephone number provided in the notice.
 - (5) This section takes effect upon this act becoming a law. Section 52. Application of suspensions for failure to



maintain security; reinstatement.—All suspensions for failure to maintain required security as required by law in effect before January 1, 2019, remain in full force and effect after January 1, 2019. A driver may reinstate a suspended driver license or registration as provided under s. 324.0221, Florida Statutes.

Section 53. For the 2018-2019 fiscal year, the sum of \$83,651 in nonrecurring funds is appropriated from the Insurance Regulatory Trust Fund to the Office of Insurance Regulation for the purpose of implementing this act.

Section 54. Except as otherwise expressly provided in this act and except for this section, which shall take effect upon this act becoming a law, this act shall take effect January 1, 2019.

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> ======= T I T L E A M E N D M E N T ========= And the title is amended as follows:

Delete everything before the enacting clause and insert:

2784 A bill to be entitled

> An act relating to motor vehicle insurance; repealing ss. 627.730, 627.731, 627.7311, 627.732, 627.733, 627.734, 627.736, 627.737, 627.739, 627.7401, 627.7403, and 627.7405, F.S., which comprise the Florida Motor Vehicle No-Fault Law; repealing s. 627.7407, F.S., relating to application of the Florida Motor Vehicle No-Fault Law; amending s. 316.646, F.S.; revising a requirement for proof of security on a motor vehicle and the applicability of the requirement; amending s. 318.18, F.S.; conforming a

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provision to changes made by the act; amending s. 320.02, F.S.; revising the motor vehicle insurance coverages that an applicant must show to register certain vehicles with the Department of Highway Safety and Motor Vehicles; deleting a requirement that specified information be included on a certain insurance proof-of-purchase card; revising construction; amending s. 320.0609, F.S.; conforming a provision to changes made by the act; amending s. 320.27, F.S.; defining the term "garage liability insurance"; revising garage liability insurance requirements for motor vehicle dealer applicants; conforming a provision to changes made by the act; amending s. 320.771, F.S.; revising garage liability insurance requirements for recreational vehicle dealer license applicants; amending ss. 322.251 and 322.34, F.S.; conforming provisions to changes made by the act; amending s. 324.011, F.S.; revising legislative intent; amending s. 324.021, F.S.; revising definitions of the terms "motor vehicle" and "proof of financial responsibility"; revising, at specified timeframes, minimum coverage requirements for proof of financial responsibility for specified motor vehicles; defining the term "for-hire passenger transportation vehicle"; conforming provisions to changes made by the act; amending s. 324.022, F.S.; revising, at specified timeframes, minimum liability coverage requirements for motor vehicle owners or operators; revising authorized methods for meeting such requirements;

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revising the vehicles that are excluded from the definition of the term "motor vehicle" and providing security requirements for certain excluded vehicles; conforming provisions to changes made by the act; conforming cross-references; amending s. 324.0221, F.S.; revising applicability of certain insurer reporting and notice requirements as to policies providing certain coverages; conforming provisions to changes made by the act; amending s. 324.023, F.S.; conforming cross-references; amending s. 324.031, F.S.; revising applicability of a provision authorizing certain methods of proving financial responsibility; revising, at specified timeframes, the amount of a certificate of deposit required for a specified method of proof of financial responsibility; revising excess liability coverage requirements for a person electing to use such method; amending s. 324.032, F.S.; revising financial responsibility requirements for owners or lessees of for-hire passenger transportation vehicles and the applicability of such requirements; revising a requirement for a motor vehicle liability policy obtained to comply with such requirements; amending ss. 324.051, 324.071, 324.091, and 324.151, F.S.; making technical changes; amending s. 324.161, F.S.; revising requirements for a certificate of deposit that is required if a person elects a certain method of providing financial responsibility; amending s. 324.171, F.S.; revising, at specified timeframes, the

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minimum net worth requirements to qualify certain persons as self-insurers; conforming provisions to changes made by the act; amending s. 324.251, F.S.; revising the short title and an effective date; amending s. 400.9905, F.S.; revising the definition of the term "clinic"; amending ss. 400.991 and 400.9935, F.S.; conforming provisions to changes made by the act; amending s. 409.901, F.S.; revising the definition of the term "third-party benefit"; amending s. 409.910, F.S.; revising the definition of the term "medical coverage"; making technical changes; amending s. 456.057, F.S.; conforming a cross-reference; amending s. 456.072, F.S.; revising specified grounds for discipline for certain health professions; amending s. 626.9541, F.S.; conforming a provision to changes made by the act; revising the type of insurance coverage applicable to a certain prohibited act; conforming a cross-reference; amending s. 626.989, F.S.; revising the definition of the term "fraudulent insurance act"; amending s. 627.06501, F.S.; revising coverages that may provide for a reduction in motor vehicle insurance policy premium charges under certain circumstances; amending s. 627.0652, F.S.; revising coverages that must provide a premium charge reduction under certain circumstances; amending s. 627.0653, F.S.; revising coverages subject to premium discounts for specified motor vehicle equipment; amending s. 627.4132, F.S.; revising the coverages of a motor vehicle policy which are subject

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to a stacking prohibition; amending s. 627.7263, F.S.; revising provisions relating to designation of primary coverages for rental and leasing driver's insurance; conforming provisions to changes made by the act; creating s. 627.7265, F.S.; requiring specified motor vehicle liability insurance policies to include medical payments coverage; specifying persons such coverage must protect; specifying the minimum medical expense coverage and minimum death benefit required under such coverage; providing construction relating to limits on certain other coverages; prohibiting insurers from offering such coverage to an applicant or policyholder with a deductible; specifying medical services and care required under such coverage; authorizing insurers to exclude medical payment benefits under certain circumstances; providing that medical payments benefits are primary to certain health insurance benefits and apply to the coinsurance or deductible amounts required by certain health insurance policies, except under certain circumstances; providing that a medical payments insurance policy, under certain circumstances, may include a subrogation provision for medical payments benefits paid; requiring insurers, upon receiving a certain notice, to hold a specified reserve for certain purposes for a specified time; providing that the reserve requirement does not require insurers to establish a claim reserve for accounting purposes; specifying requirements, procedures, limitations, and

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prohibitions relating to charges and billing for care of bodily injuries under medical payments coverage; defining the term "service year"; requiring the Department of Health to adopt a certain rule; providing insurers a civil cause of action against certain persons who are convicted of or plead guilty or nolo contendre to certain acts of insurance fraud associated with claims for medical payments coverage benefits; requiring insurers receiving notice of a claim to provide a specified fraud advisory notice to certain persons; providing that claims generated as a result of certain patient brokering activities are nonreimbursable; authorizing notices, documentation, transmissions, or communications to be transferred electronically in a secure manner; amending s. 627.727, F.S.; conforming provisions to changes made by the act; amending s. 627.7275, F.S.; revising applicability and required coverages for a motor vehicle insurance policy; conforming provisions to changes made by the act; amending s. 627.728, F.S.; conforming a provision to changes made by the act; amending s. 627.7295, F.S.; revising the definitions of the terms "policy" and "binder"; revising the coverages of a motor vehicle insurance policy for which a licensed general lines agent may charge a specified fee; revising applicability; conforming a cross-reference; amending s. 627.7415, F.S.; revising, at specified intervals, the minimum levels of certain liability insurance required for commercial motor

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vehicles; amending s. 627.8405, F.S.; revising coverages in a policy sold in combination with an accidental death and dismemberment policy, which a premium finance company may not finance; revising rulemaking authority of the commission; amending ss. 627.915, 628.909, 705.184, and 713.78, F.S.; conforming provisions to changes made by the act; amending s. 817.234, F.S.; revising coverages that are the basis of specified prohibited false and fraudulent insurance claims; conforming a provision to changes made by the act; conforming a cross-reference; providing applicability and construction relating to changes made by the act; defining the term "minimum security requirements"; providing requirements and procedures relating to motor vehicle insurance policies that include personal injury protection as of a specified date; requiring an insurer to provide, by a specified date, a specified notice to policyholders relating to requirements under the act; providing for construction relating to suspensions for failure to maintain required security in effect before a specified date; providing an appropriation; providing effective dates.

	LEGISLATIVE ACTION	
Senate		House
Comm: UNFAV		
02/28/2018		

Appropriations Subcommittee on Health and Human Services (Lee) recommended the following:

Senate Amendment (with title amendment)

Delete everything after the enacting clause and insert:

Section 1. Sections 627.730, 627.731, 627.7311, 627.732, <u>627.733, 627.734, 627.73</u>6, 627.737, 627.739, 627.7401, 627.7403, and 627.7405, Florida Statutes, which comprise the Florida Motor Vehicle No-Fault Law, are repealed.

Section 2. Section 627.7407, Florida Statutes, is repealed. Section 3. Subsection (1) of section 316.646, Florida

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Statutes, is amended to read:

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

- (1) Any person required by s. 324.022 to maintain liability security for property damage, liability security, required by s. 324.023 to maintain liability security for bodily injury, or death, or required by s. 627.733 to maintain personal injury protection security on a motor vehicle shall have in his or her immediate possession at all times while operating such motor vehicle proper proof of maintenance of the required security required under s. 324.021(7).
- (a) Such proof must shall be in a uniform paper or electronic format, as prescribed by the department, a valid insurance policy, an insurance policy binder, a certificate of insurance, or such other proof as may be prescribed by the department.
- (b) 1. The act of presenting to a law enforcement officer an electronic device displaying proof of insurance in an electronic format does not constitute consent for the officer to access any information on the device other than the displayed proof of insurance.
- 2. The person who presents the device to the officer assumes the liability for any resulting damage to the device.
- Section 4. Paragraph (b) of subsection (2) of section 318.18, Florida Statutes, is amended to read:
- 318.18 Amount of penalties. The penalties required for a noncriminal disposition pursuant to s. 318.14 or a criminal offense listed in s. 318.17 are as follows:
 - (2) Thirty dollars for all nonmoving traffic violations



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- (b) For all violations of ss. 320.0605, 320.07(1), 322.065, and 322.15(1). A Any person who is cited for a violation of s. 320.07(1) shall be charged a delinquent fee pursuant to s. 320.07(4).
- 1. If a person who is cited for a violation of s. 320.0605 or s. 320.07 can show proof of having a valid registration at the time of arrest, the clerk of the court may dismiss the case and may assess a dismissal fee of up to \$10. A person who finds it impossible or impractical to obtain a valid registration certificate must submit an affidavit detailing the reasons for the impossibility or impracticality. The reasons may include, but are not limited to, the fact that the vehicle was sold, stolen, or destroyed; that the state in which the vehicle is registered does not issue a certificate of registration; or that the vehicle is owned by another person.
- 2. If a person who is cited for a violation of s. 322.03, s. 322.065, or s. 322.15 can show a driver license issued to him or her and valid at the time of arrest, the clerk of the court may dismiss the case and may assess a dismissal fee of up to \$10.
- 3. If a person who is cited for a violation of s. 316.646 can show proof of security as required by s. 324.021(7) s. 627.733, issued to the person and valid at the time of arrest, the clerk of the court may dismiss the case and may assess a dismissal fee of up to \$10. A person who finds it impossible or impractical to obtain proof of security must submit an affidavit detailing the reasons for the impracticality. The reasons may include, but are not limited to, the fact that the vehicle has

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since been sold, stolen, or destroyed; that the owner registrant of the vehicle is not required by s. 627.733 to maintain personal injury protection insurance; or that the vehicle is owned by another person.

Section 5. Paragraphs (a) and (d) of subsection (5) of section 320.02, Florida Statutes, are amended to read:

320.02 Registration required; application for registration; forms.-

(5)(a) Proof that bodily injury liability coverage and property damage liability coverage personal injury protection benefits have been purchased if required under s. 324.022, s. 324.032, or s. 627.742, that medical payments coverage has been purchased if required under s. 627.7265 s. 627.733, that property damage liability coverage has been purchased as required under s. 324.022, that bodily injury liability or death coverage has been purchased if required under s. 324.023, and that combined bodily liability insurance and property damage liability insurance have been purchased if required under s. 627.7415 must shall be provided in the manner prescribed by law by the applicant at the time of application for registration of any motor vehicle that is subject to such requirements. The issuing agent may not shall refuse to issue registration if such proof of purchase is not provided. Insurers shall furnish uniform proof-of-purchase cards in a paper or electronic format in a form prescribed by the department and include the name of the insured's insurance company, the coverage identification number, and the make, year, and vehicle identification number of the vehicle insured. The card must contain a statement notifying the applicant of the penalty specified under s. 316.646(4). The



98 card or insurance policy, insurance policy binder, or 99 certificate of insurance or a photocopy of any of these; an 100 affidavit containing the name of the insured's insurance 101 company, the insured's policy number, and the make and year of 102 the vehicle insured; or such other proof as may be prescribed by 103 the department constitutes shall constitute sufficient proof of purchase. If an affidavit is provided as proof, it must be in 104 105 substantially the following form: 106 107 Under penalty of perjury, I ... (Name of insured) ... do hereby 108 certify that I have ... (bodily injury liability and Personal 109 Injury Protection, property damage liability coverage, and 110 medical payments coverage, and, if required, Bodily Injury 111 Liability)... Insurance currently in effect with ... (Name of 112 insurance company)... under ... (policy number)... covering ... (make, year, and vehicle identification number of 113 114 vehicle) (Signature of Insured) ... 115 116 Such affidavit must include the following warning: 117 118 WARNING: GIVING FALSE INFORMATION IN ORDER TO OBTAIN A VEHICLE 119 REGISTRATION CERTIFICATE IS A CRIMINAL OFFENSE UNDER FLORIDA 120 LAW. ANYONE GIVING FALSE INFORMATION ON THIS AFFIDAVIT IS 121 SUBJECT TO PROSECUTION. 122 123 If an application is made through a licensed motor vehicle 124 dealer as required under s. 319.23, the original or a photocopy 125 photostatic copy of such card, insurance policy, insurance policy binder, or certificate of insurance or the original 126

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affidavit from the insured must shall be forwarded by the dealer to the tax collector of the county or the Department of Highway Safety and Motor Vehicles for processing. By executing the aforesaid affidavit, a no licensed motor vehicle dealer is not will be liable in damages for any inadequacy, insufficiency, or falsification of any statement contained therein. A card must also indicate the existence of any bodily injury liability insurance voluntarily purchased.

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

Section 6. Paragraph (b) of subsection (1) of section



156 320.0609, Florida Statutes, is amended to read:

> 320.0609 Transfer and exchange of registration license plates; transfer fee.-

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

Section 7. Paragraph (g) is added to subsection (1) of section 320.27, Florida Statutes, and subsection (3) of that section is amended, to read:

320.27 Motor vehicle dealers.

- (1) DEFINITIONS.—The following words, terms, and phrases when used in this section have the meanings respectively ascribed to them in this subsection, except where the context clearly indicates a different meaning:
- (g) "Garage liability insurance" means combined singlelimit liability coverage, including property damage and bodily injury liability coverage, in the amount of:
- 1. Beginning January 1, 2019, and continuing through December 31, 2020, at least \$50,000.
- 2. Beginning January 1, 2021, and thereafter, at least \$60,000.
- (3) APPLICATION AND FEE.—The application for the license application must shall be in such form as may be prescribed by the department and is shall be subject to such rules with respect thereto as may be so prescribed by the department it. Such application must shall be verified by oath or affirmation

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and must shall contain a full statement of the name and birth date of the person or persons applying for the license therefor; the name of the firm or copartnership, with the names and places of residence of all members thereof, if such applicant is a firm or copartnership; the names and places of residence of the principal officers, if the applicant is a body corporate or other artificial body; the name of the state under whose laws the corporation is organized; the present and former place or places of residence of the applicant; and the prior business in which the applicant has been engaged and its the location thereof. The Such application must shall describe the exact location of the place of business and must shall state whether the place of business is owned by the applicant and when acquired, or, if leased, a true copy of the lease must shall be attached to the application. The applicant shall certify that the location provides an adequately equipped office and is not a residence; that the location affords sufficient unoccupied space upon and within which adequately to store all motor vehicles offered and displayed for sale; and that the location is a suitable place where the applicant can in good faith carry on such business and keep and maintain books, records, and files necessary to conduct such business, which must shall be available at all reasonable hours to inspection by the department or any of its inspectors or other employees. The applicant shall certify that the business of a motor vehicle dealer is the principal business that will which shall be conducted at that location. The application must shall contain a statement that the applicant is either franchised by a manufacturer of motor vehicles, in which case the name of each

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motor vehicle that the applicant is franchised to sell must shall be included, or an independent (nonfranchised) motor vehicle dealer. The application must shall contain other relevant information as may be required by the department. The applicant must furnish, including evidence, in a form approved by the department, that the applicant is insured under a garage liability insurance policy or a general liability insurance policy coupled with a business automobile policy having the garage liability insurance coverage required by this subsection, which shall include, at a minimum, \$25,000 combined single-limit liability coverage including bodily injury and property damage protection and \$10,000 personal injury protection. However, a salvage motor vehicle dealer as defined in subparagraph (1)(c)5. is exempt from the requirements for garage liability insurance and medical payments coverage insurance and personal injury protection insurance on those vehicles that cannot be legally operated on roads, highways, or streets in this state. Franchise dealers must submit a garage liability insurance policy, and all other dealers must submit a garage liability insurance policy or a general liability insurance policy coupled with a business automobile policy. Such policy must shall be for the license period, and evidence of a new or continued policy must shall be delivered to the department at the beginning of each license period. Upon making an initial application, the applicant shall pay to the department a fee of \$300 in addition to any other fees required by law. Applicants may choose to extend the licensure period for 1 additional year for a total of 2 years. An initial applicant shall pay to the department a fee of \$300 for the first year and \$75 for the second year, in addition to

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any other fees required by law. An applicant for renewal shall pay to the department \$75 for a 1-year renewal or \$150 for a 2year renewal, in addition to any other fees required by law. Upon making an application for a change of location, the applicant person shall pay a fee of \$50 in addition to any other fees now required by law. The department shall, in the case of every application for initial licensure, verify whether certain facts set forth in the application are true. Each applicant, general partner in the case of a partnership, or corporate officer and director in the case of a corporate applicant shall, must file a set of fingerprints with the department for the purpose of determining any prior criminal record or any outstanding warrants. The department shall submit the fingerprints to the Department of Law Enforcement for state processing and forwarding to the Federal Bureau of Investigation for federal processing. The actual cost of state and federal processing must shall be borne by the applicant and is in addition to the fee for licensure. The department may issue a license to an applicant pending the results of the fingerprint investigation, which license is fully revocable if the department subsequently determines that any facts set forth in the application are not true or correctly represented.

Section 8. Paragraph (j) of subsection (3) of section 320.771, Florida Statutes, is amended to read:

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



(j) A statement that the applicant is insured under a garage liability insurance policy in accordance with s. 320.27(1)(g), which shall include, at a minimum, \$25,000 combined single-limit liability coverage, including bodily injury and property damage protection, and \$10,000 personal injury protection, if the applicant is to be licensed as a dealer in, or intends to sell, recreational vehicles.

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

Section 9. Subsections (1) and (2) of section 322.251, Florida Statutes, are amended to read:

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

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

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of the licensee's driving privilege.

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

Section 10. Paragraph (a) of subsection (8) of section 322.34, Florida Statutes, is amended to read:

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

- (8)(a) Upon the arrest of a person for the offense of driving while the person's driver license or driving privilege is suspended or revoked, the arresting officer shall determine:
- 1. Whether the person's driver license is suspended or revoked.
- 2. Whether the person's driver license has remained suspended or revoked since a conviction for the offense of driving with a suspended or revoked license.
- 3. Whether the suspension or revocation was made under s. 316.646 or s. 627.733, relating to failure to maintain required security, or under s. 322.264, relating to habitual traffic offenders.
 - 4. Whether the driver is the registered owner or coowner of



the vehicle.

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Section 11. Section 324.011, Florida Statutes, is amended to read:

324.011 Legislative intent and purpose of chapter.—It is the Legislature's intent of this chapter to ensure that the privilege of owning or operating a motor vehicle in this state be exercised recognize the existing privilege to own or operate a motor vehicle on the public streets and highways of this state when such vehicles are used with due consideration for others' safety others and their property, and to promote safety, and to provide financial security requirements for such owners and or operators whose responsibility it is to recompense others for injury to person or property caused by the operation of a motor vehicle. Therefore, this chapter requires that every owner or operator of a motor vehicle required to be registered in this state establish, maintain, and it is required herein that the operator of a motor vehicle involved in a crash or convicted of certain traffic offenses meeting the operative provisions of s. 324.051(2) shall respond for such damages and show proof of financial ability to respond for damages arising out of the ownership, maintenance, or use of a motor vehicle in future accidents as a requisite to owning or operating a motor vehicle in this state his or her future exercise of such privileges.

Section 12. Subsections (1) and (7) and paragraph (c) of subsection (9) of section 324.021, Florida Statutes, are amended, and subsection (12) is added to that section, to read:

324.021 Definitions; minimum insurance required.—The following words and phrases when used in this chapter shall, for the purpose of this chapter, have the meanings respectively

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ascribed to them in this section, except in those instances where the context clearly indicates a different meaning:

- (1) MOTOR VEHICLE.—Every self-propelled vehicle that is designed and required to be licensed for use upon a highway, including trailers and semitrailers designed for use with such vehicles, except traction engines, road rollers, farm tractors, power shovels, and well drillers, and every vehicle that is propelled by electric power obtained from overhead wires but not operated upon rails, but not including any personal delivery device as defined in s. 316.003, bicycle, or moped. However, the term "motor vehicle" does not include a motor vehicle as defined in s. 627.732(3) when the owner of such vehicle has complied with the requirements of ss. 627.730-627.7405, inclusive, unless the provisions of s. 324.051 apply; and, in such case, the applicable proof of insurance provisions of s. 320.02 apply.
- (7) PROOF OF FINANCIAL RESPONSIBILITY.—That Proof of ability to respond in damages for liability on account of crashes arising out of the ownership, maintenance, or use of a motor vehicle:
- (a) With respect to a motor vehicle that is not a commercial motor vehicle, nonpublic sector bus, or for-hire passenger transportation vehicle:
- 1. Beginning January 1, 2019, and continuing through December 31, 2020, in the amount of:
- a. Twenty thousand dollars for \$10,000 because of bodily injury to, or the death of, one person in any one crash and, +
- (b) subject to such limits for one person, in the amount of \$40,000 for \$20,000 because of bodily injury to, or the death of, two or more persons in any one crash; and



388 b. Ten thousand dollars for damage to, or destruction of, 389 property of others in any one crash. 2. Beginning January 1, 2021, and thereafter, in the amount 390 391 of: 392 a. Twenty-five thousand dollars for bodily injury to, or 393 the death of, one person in any one crash and, subject to such 394 limits for one person, in the amount of \$50,000 for bodily 395 injury to, or the death of, two or more persons in any one 396 crash; and 397 b. (c) Ten thousand dollars for damage In the amount of 398 \$10,000 because of injury to, or destruction of, property of 399 others in any one crash.; and 400 (b) (d) With respect to commercial motor vehicles and 401 nonpublic sector buses, in the amounts specified in s. 627.7415 402 ss. 627.7415 and 627.742, respectively. 403 (c) With respect to nonpublic sector buses, in the amounts 404 specified in s. 627.742. 405 (d) With respect to for-hire passenger transportation 406 vehicles, in the amounts specified in s. 324.032. 407 (9) OWNER; OWNER/LESSOR.-408 (c) Application.— 409 1. The limits on liability in subparagraphs (b) 2. and 3. do 410 not apply to an owner of motor vehicles that are used for 411 commercial activity in the owner's ordinary course of business, 412 other than a rental company that rents or leases motor vehicles. 413 For purposes of this paragraph, the term "rental company" 414 includes only an entity that is engaged in the business of 415 renting or leasing motor vehicles to the general public and that

rents or leases a majority of its motor vehicles to persons with

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no direct or indirect affiliation with the rental company. The term also includes a motor vehicle dealer that provides temporary replacement vehicles to its customers for up to 10 days. The term "rental company" also includes:

- a. A related rental or leasing company that is a subsidiary of the same parent company as that of the renting or leasing company that rented or leased the vehicle.
- b. The holder of a motor vehicle title or an equity interest in a motor vehicle title if the title or equity interest is held pursuant to or to facilitate an asset-backed securitization of a fleet of motor vehicles used solely in the business of renting or leasing motor vehicles to the general public and under the dominion and control of a rental company, as described in this subparagraph, in the operation of such rental company's business.
- 2. Furthermore, with respect to commercial motor vehicles as defined in s. 207.002 or s. 320.01 $\frac{1}{8}$ 627.732, the limits on liability in subparagraphs (b) 2. and 3. do not apply if, at the time of the incident, the commercial motor vehicle is being used in the transportation of materials found to be hazardous for the purposes of the Hazardous Materials Transportation Authorization Act of 1994, as amended, 49 U.S.C. ss. 5101 et seq., and that is required pursuant to such act to carry placards warning others of the hazardous cargo, unless at the time of lease or rental either:
- a. The lessee indicates in writing that the vehicle will not be used to transport materials found to be hazardous for the purposes of the Hazardous Materials Transportation Authorization Act of 1994, as amended, 49 U.S.C. ss. 5101 et seq.; or

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- b. The lessee or other operator of the commercial motor vehicle has in effect insurance with limits of at least \$5 million \$5,000,000 combined property damage and bodily injury liability. (12) FOR-HIRE PASSENGER TRANSPORTATION VEHICLE.—Every "for-
- hire vehicle" as defined in s. 320.01(15) which is offered or used to provide transportation for persons, including taxicabs, limousines, and jitneys.
- Section 13. Section 324.022, Florida Statutes, is amended to read:
- 324.022 Financial responsibility requirements for property damage.-
- (1) (a) Every owner or operator of a motor vehicle required to be registered in this state shall establish and continuously maintain the ability to respond in damages for liability on account of accidents arising out of the use of the motor vehicle in the amount of:
- 1. Beginning January 1, 2019, and continuing through December 31, 2020:
- a. Twenty thousand dollars for bodily injury to, or the death of, one person in any one crash and, subject to such limits for one person, in the amount of \$40,000 for bodily injury to, or the death of, two or more persons in any one crash; and
- b. Ten thousand dollars for damage to, or destruction of, property of others in any one crash.
 - 2. Beginning January 1, 2021, and thereafter:
- a. Twenty-five thousand dollars for bodily injury to, or the death of, one person in any one crash and, subject to such

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limits for one person, in the amount of \$50,000 for bodily injury to, or the death of, two or more persons in any one crash; and

- b. Ten thousand dollars for \$10,000 because of damage to, or destruction of, property of others in any one crash.
- (b) The requirements of paragraph (a) this section may be met by one of the methods established in s. 324.031; by selfinsuring as authorized by s. 768.28(16); or by maintaining medical payments coverage under s. 627.7265 and a motor vehicle liability insurance policy that an insurance policy providing coverage for property damage liability in the amount of at least \$10,000 because of damage to, or destruction of, property of others in any one accident arising out of the use of the motor vehicle. The requirements of this section may also be met by having a policy which provides combined property damage liability and bodily injury liability coverage for any one crash arising out of the ownership, maintenance, or use of a motor vehicle which conforms to the requirements of s. 324.151 in the amount of:
- 1. At least \$50,000 for every owner or operator subject to the financial responsibility required in subparagraph (1)(a)1.
- 2. At least \$60,000 for every owner or operator subject to the financial responsibility required in subparagraph (1)(a)2. \$30,000 for combined property damage liability and bodily injury liability for any one crash arising out of the use of the motor vehicle. The policy, with respect to coverage for property damage liability, must meet the applicable requirements of s. 324.151, subject to the usual policy exclusions that have been approved in policy forms by the Office of Insurance Regulation.

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No insurer shall have any duty to defend uncovered claims irrespective of their joinder with covered claims.

- (2) As used in this section, the term:
- (a) "Motor vehicle" means any self-propelled vehicle that has four or more wheels and that is of a type designed and required to be licensed for use on the highways of this state, and any trailer or semitrailer designed for use with such vehicle. The term does not include the following:
 - 1. A mobile home as defined in s. 320.01.
- 2. A motor vehicle that is used in mass transit and designed to transport more than five passengers, exclusive of the operator of the motor vehicle, and that is owned by a municipality, transit authority, or political subdivision of the state.
- 3. A school bus as defined in s. 1006.25, which shall maintain security as required under s. 316.615.
- 4. A commercial motor vehicle as defined in s. 207.002 or s. 320.01, which shall maintain security as required under ss. 324.031 and 627.7415.
- 5. A nonpublic sector bus, which shall maintain security as required under ss. 324.031 and 627.742.
- 6.4. A vehicle providing for-hire passenger transportation vehicle, which that is subject to the provisions of s. 324.031. A taxicab shall maintain security as required under s. 324.032 s. 324.032(1).
 - 7.5. A personal delivery device as defined in s. 316.003.
- (b) "Owner" means the person who holds legal title to a motor vehicle or the debtor or lessee who has the right to possession of a motor vehicle that is the subject of a security

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agreement or lease with an option to purchase.

- (3) Each nonresident owner or registrant of a motor vehicle that, whether operated or not, has been physically present within this state for more than 90 days during the preceding 365 days shall maintain security as required by subsection (1). The security must be that is in effect continuously throughout the period the motor vehicle remains within this state.
- (4) An The owner or registrant of a motor vehicle who is exempt from the requirements of this section if she or he is a member of the United States Armed Forces and is called to or on active duty outside the United States in an emergency situation is exempt from this section while he or she. The exemption provided by this subsection applies only as long as the member of the Armed Forces is on such active duty. This exemption outside the United States and applies only while the vehicle covered by the security is not operated by any person. Upon receipt of a written request by the insured to whom the exemption provided in this subsection applies, the insurer shall cancel the coverages and return any unearned premium or suspend the security required by this section. Notwithstanding s. 324.0221(2) s. 324.0221(3), the department may not suspend the registration or operator's license of an any owner or registrant of a motor vehicle during the time she or he qualifies for the an exemption under this subsection. An Any owner or registrant of a motor vehicle who qualifies for the an exemption under this subsection shall immediately notify the department before prior to and at the end of the expiration of the exemption.

Section 14. Subsections (1) and (2) of section 324.0221, Florida Statutes, are amended to read:

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324.0221 Reports by insurers to the department; suspension of driver license and vehicle registrations; reinstatement .-

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

(b) With respect to an insurance policy providing medical payments coverage or personal injury protection coverage or property damage liability coverage, each insurer shall notify the named insured, or the first-named insured in the case of a commercial fleet policy, in writing that any cancellation or nonrenewal of the policy will be reported by the insurer to the

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department. The notice must also inform the named insured that failure to maintain medical payments coverage, bodily injury liability personal injury protection coverage, and property damage liability coverage on a motor vehicle when required by law may result in the loss of registration and driving privileges in this state and inform the named insured of the amount of the reinstatement fees required by this section. This notice is for informational purposes only, and an insurer is not civilly liable for failing to provide this notice.

- (2) The department shall suspend, after due notice and an opportunity to be heard, the registration and driver license of any owner or registrant of a motor vehicle for with respect to which security is required under s. 324.022, s. 324.032, s. 627.7415, or s. 627.742 ss. 324.022 and 627.733 upon:
- (a) The department's records showing that the owner or registrant of such motor vehicle did not have the in full force and effect when required security in full force and effect that complies with the requirements of ss. 324.022 and 627.733; or
- (b) Notification by the insurer to the department, in a form approved by the department, of cancellation or termination of the required security.

Section 15. Section 324.023, Florida Statutes, is amended to read:

324.023 Financial responsibility for bodily injury or death.—In addition to any other financial responsibility required by law, every owner or operator of a motor vehicle that is required to be registered in this state, or that is located within this state, and who, regardless of adjudication of quilt, has been found guilty of or entered a plea of guilty or nolo

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contendere to a charge of driving under the influence under s. 316.193 after October 1, 2007, shall, by one of the methods established in s. 324.031(1) (a) or (b) s. 324.031(1) or (2), establish and maintain the ability to respond in damages for liability on account of accidents arising out of the use of a motor vehicle in the amount of \$100,000 because of bodily injury to, or death of, one person in any one crash and, subject to such limits for one person, in the amount of \$300,000 because of bodily injury to, or death of, two or more persons in any one crash and in the amount of \$50,000 because of property damage in any one crash. If the owner or operator chooses to establish and maintain such ability by furnishing a certificate of deposit pursuant to s. 324.031(1) (b) s. 324.031(2), such certificate of deposit must be at least \$350,000. Such higher limits must be carried for a minimum period of 3 years. If the owner or operator has not been convicted of driving under the influence or a felony traffic offense for a period of 3 years from the date of reinstatement of driving privileges for a violation of s. 316.193, the owner or operator shall be exempt from this section.

Section 16. Section 324.031, Florida Statutes, is amended to read:

324.031 Manner of proving financial responsibility.-

(1) The owner or operator of a taxicab, limousine, jitney, or any other for-hire passenger transportation vehicle may prove financial responsibility by providing satisfactory evidence of holding a motor vehicle liability policy as defined in s. 324.021(8) or s. 324.151, which policy is issued by an insurance carrier which is a member of the Florida Insurance Guaranty

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Association. The operator or owner of a motor vehicle other than a for-hire passenger transportation vehicle any other vehicle may prove his or her financial responsibility by: (a) (1) Furnishing satisfactory evidence of holding a motor vehicle liability policy as defined in ss. 324.021(8) and 324.151; (b) (2) Furnishing a certificate of self-insurance showing a deposit of cash in accordance with s. 324.161; or (c) (3) Furnishing a certificate of self-insurance issued by the department in accordance with s. 324.171. (2) (a) Any person, including any firm, partnership, association, corporation, or other person, other than a natural person, electing to use the method of proof specified in paragraph (1)(b) subsection (2) shall furnish a certificate of deposit equal to the number of vehicles owned times: 1. Fifty thousand dollars, to a maximum of \$200,000, from January 1, 2019, through December 31, 2020. 2. Sixty thousand dollars \$30,000, to a maximum of \$240,000, from January 1, 2021, and thereafter. \$120,000; (b) In addition, any such person, other than a natural person, shall maintain insurance providing coverage conforming to the requirements of s. 324.151 in excess of the amount of the certificate of deposit, with limits of at least: 1. One hundred twenty-five thousand dollars for bodily injury to, or the death of, one person in any one crash and, subject to such limits for one person, in the amount of \$250,000 for bodily injury to, or the death of, two or more persons in

property of others in any one crash; or \$10,000/20,000/10,000 or

any one crash, and \$50,000 for damage to, or destruction of,

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\$30,000 combined single limits, and such excess insurance shall provide minimum limits of \$125,000/250,000/50,000 or \$300,000 combined single limits. These increased limits shall not affect the requirements for proving financial responsibility under s. 324.032(1).

2. Three hundred thousand dollars for combined bodily injury liability and property damage liability for any one crash.

Section 17. Section 324.032, Florida Statutes, is amended to read:

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

- (1) An owner or lessee of a for-hire passenger transportation vehicle that is required to be registered in this state shall establish and continuously maintain the ability to respond in damages for liability on account of accidents arising out of the ownership, maintenance, or use of the for-hire passenger transportation vehicle, in the amount of:
- (a) One hundred twenty-five thousand dollars for bodily injury to, or the death of, one person in any one crash and, subject to such limits for one person, in the amount of \$250,000 for bodily injury to, or the death of, two or more persons in any one crash; and A person who is either the owner or a lessee required to maintain insurance under s. 627.733(1)(b) and who operates one or more taxicabs, limousines, jitneys, or any other for-hire passenger transportation vehicles may prove financial responsibility by furnishing satisfactory evidence of holding a motor vehicle liability policy, but with minimum limits of



\$125,000/250,000/50,000.

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- (b) Fifty thousand dollars for damage to, or destruction of, property of others in any one crash A person who is either the owner or a lessee required to maintain insurance under s. 324.021(9)(b) and who operates limousines, jitneys, or any other for-hire passenger vehicles, other than taxicabs, may prove financial responsibility by furnishing satisfactory evidence of holding a motor vehicle liability policy as defined in s. 324.031.
- (2) Except as provided in subsection (3), the requirements of this section must be met by the owner or lessee providing satisfactory evidence of holding a motor vehicle liability policy conforming to the requirements of s. 324.151 which is issued by an insurance carrier that is a member of the Florida Insurance Guaranty Association.
- (3) (2) An owner or a lessee who is required to maintain insurance under s. 324.021(9)(b) and who operates at least 300 taxicabs, limousines, jitneys, or any other for-hire passenger transportation vehicles may provide financial responsibility by complying with the provisions of s. 324.171, such compliance to be demonstrated by maintaining at its principal place of business an audited financial statement, prepared in accordance with generally accepted accounting principles, and providing to the department a certification issued by a certified public accountant that the applicant's net worth is at least equal to the requirements of s. 324.171 as determined by the Office of Insurance Regulation of the Financial Services Commission, including claims liabilities in an amount certified as adequate by a Fellow of the Casualty Actuarial Society.

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Upon request by the department, the applicant shall must provide the department at the applicant's principal place of business in this state access to the applicant's underlying financial information and financial statements that provide the basis of the certified public accountant's certification. The applicant shall reimburse the requesting department for all reasonable costs incurred by it in reviewing the supporting information. The maximum amount of self-insurance permissible under this subsection is \$300,000 and must be stated on a per-occurrence basis, and the applicant shall maintain adequate excess insurance issued by an authorized or eligible insurer licensed or approved by the Office of Insurance Regulation. All risks self-insured shall remain with the owner or lessee providing it, and the risks are not transferable to any other person, unless a policy complying with subsections (1) and (2) subsection (1) is

Section 18. Paragraph (b) of subsection (2) of section 324.051, Florida Statutes, is amended to read:

324.051 Reports of crashes; suspensions of licenses and registrations.-

(2)

obtained.

- (b) This subsection does shall not apply:
- 1. To such operator or owner if such operator or owner had in effect at the time of such crash or traffic conviction a motor vehicle an automobile liability policy with respect to all of the registered motor vehicles owned by such operator or owner.
 - 2. To such operator, if not the owner of such motor

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vehicle, if there was in effect at the time of such crash or traffic conviction a motor vehicle an automobile liability policy or bond with respect to his or her operation of motor vehicles not owned by him or her.

- 3. To such operator or owner if the liability of such operator or owner for damages resulting from such crash is, in the judgment of the department, covered by any other form of liability insurance or bond.
- 4. To any person who has obtained from the department a certificate of self-insurance, in accordance with s. 324.171, or to any person operating a motor vehicle for such self-insurer.

No such policy or bond shall be effective under this subsection unless it contains limits of not less than those specified in s. 324.021(7).

Section 19. Section 324.071, Florida Statutes, is amended to read:

324.071 Reinstatement; renewal of license; reinstatement fee. -An Any operator or owner whose license or registration has been suspended pursuant to s. 324.051(2), s. 324.072, s. 324.081, or s. 324.121 may effect its reinstatement upon compliance with the provisions of s. 324.051(2)(a)3. or 4., or s. 324.081(2) and (3), as the case may be, and with one of the provisions of s. 324.031 and upon payment to the department of a nonrefundable reinstatement fee of \$15. Only one such fee may shall be paid by any one person regardless irrespective of the number of licenses and registrations to be then reinstated or issued to such person. All Such fees must shall be deposited to a department trust fund. If When the reinstatement of any

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license or registration is effected by compliance with s. 324.051(2)(a)3. or 4., the department may $\frac{shall}{shall}$ not renew the license or registration within a period of 3 years after from such reinstatement, nor may shall any other license or registration be issued in the name of such person, unless the operator continues is continuing to comply with one of the provisions of s. 324.031.

Section 20. Subsection (1) of section 324.091, Florida Statutes, is amended to read:

324.091 Notice to department; notice to insurer.

(1) Each owner and operator involved in a crash or conviction case within the purview of this chapter shall furnish evidence of automobile liability insurance or motor vehicle liability insurance within 14 days after the date of the mailing of notice of crash by the department in the form and manner as it may designate. Upon receipt of evidence that a an automobile liability policy or motor vehicle liability policy was in effect at the time of the crash or conviction case, the department shall forward to the insurer such information for verification in a method as determined by the department. The insurer shall respond to the department within 20 days after the notice as to whether or not such information is valid. If the department determines that a an automobile liability policy or motor vehicle liability policy was not in effect and did not provide coverage for both the owner and the operator, it must shall take action as it is authorized to do under this chapter.

Section 21. Section 324.151, Florida Statutes, is amended to read:

324.151 Motor vehicle liability policies; required



provisions.-

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- (1) A motor vehicle liability policy that serves as to be proof of financial responsibility under s. 324.031(1) must₇ shall be issued to owners or operators of motor vehicles under the following provisions:
- (a) A motor vehicle An owner's liability insurance policy issued to an owner of a motor vehicle registered in this state must shall designate by explicit description or by appropriate reference all motor vehicles for with respect to which coverage is thereby granted. The policy must and shall insure the person or persons owner named therein and any other person as operator using such motor vehicle or motor vehicles with the express or implied permission of such owner against loss from the liability imposed by law for damage arising out of the ownership, maintenance, or use of any such motor vehicle or motor vehicles within the United States or the Dominion of Canada, subject to limits, exclusive of interest and costs with respect to each such motor vehicle as is provided for under s. 324.021(7). Insurers may make available, with respect to property damage liability coverage, a deductible amount not to exceed \$500. In the event of a property damage loss covered by a policy containing a property damage deductible provision, the insurer shall pay to the third-party claimant the amount of any property damage liability settlement or judgment, subject to policy limits, as if no deductible existed.
- (b) An operator's motor vehicle liability policy of insurance must shall insure the person or persons named therein against loss from the liability imposed upon him or her by law for damages arising out of the use by the person of any motor

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vehicle not owned by him or her, with the same territorial limits and subject to the same limits of liability as referred to above with respect to an owner's policy of liability insurance.

- (c) All such motor vehicle liability policies must shall state the name and address of the named insured, the coverage afforded by the policy, the premium charged therefor, the policy period, the limits of liability, and must shall contain an agreement or be endorsed that insurance is provided in accordance with the coverage defined in this chapter as respects bodily injury and death or property damage or both and is subject to all provisions of this chapter. The Said policies must shall also contain a provision that the satisfaction by an insured of a judgment for such injury or damage may shall not be a condition precedent to the right or duty of the insurance carrier to make payment on account of such injury or damage, and must shall also contain a provision that bankruptcy or insolvency of the insured or of the insured's estate may shall not relieve the insurance carrier of any of its obligations under the said policy.
- (2) The provisions of This section is shall not be applicable to any automobile liability policy unless and until it is furnished as proof of financial responsibility for the future pursuant to s. 324.031, and then only from and after the date the said policy is so furnished.

Section 22. Section 324.161, Florida Statutes, is amended to read:

324.161 Proof of financial responsibility; deposit.—If a person elects to prove his or her financial responsibility under

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the method of proof specified in s. 324.031(1)(b), he or she must obtain proof of a certificate of deposit annually, in the amount required under s. 324.031(2), from a financial institution insured by the Federal Deposit Insurance Corporation or the National Credit Union Administration. Proof of such certificate of deposit Annually, before any certificate of insurance may be issued to a person, including any firm, partnership, association, corporation, or other person, other than a natural person, proof of a certificate of deposit of \$30,000 issued and held by a financial institution must be submitted to the department annually. A power of attorney will be issued to and held by the department and may be executed upon a judgment issued against such person making the deposit, for damages for because of bodily injury to or death of any person or for damages for because of injury to or destruction of property resulting from the use or operation of any motor vehicle occurring after such deposit was made. Money so deposited is shall not be subject to attachment or execution unless such attachment or execution arises shall arise out of a lawsuit suit for such damages as aforesaid.

Section 23. Subsections (1) and (2) of section 324.171, Florida Statutes, are amended to read:

324.171 Self-insurer.

(1) A Any person may qualify as a self-insurer by obtaining a certificate of self-insurance from the department. which may, in its discretion and Upon application of such a person, the department may issue a said certificate of self-insurance if the applicant when such person has satisfied the requirements of this section to qualify as a self-insurer under this section:

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- 910 (a) A private individual with private passenger vehicles 911 must shall possess a net unencumbered worth: of 1. Beginning January 1, 2019, through December 31, 2020, of 912 913 at least \$80,000.
 - 2. Beginning January 1, 2021, and thereafter, of at least \$100,000 \$40,000.
 - (b) A person, including any firm, partnership, association, corporation, or other person, other than a natural person, must shall:
 - 1. Possess a net unencumbered worth: of
 - a. Beginning January 1, 2019, through December 31, 2020, of at least \$80,000 for the first motor vehicle and \$40,000 for each additional motor vehicle.
 - b. Beginning January 1, 2021, and thereafter, of at least \$100,000 \$40,000 for the first motor vehicle and \$50,000 \$20,000 for each additional motor vehicle; or
 - 2. Maintain sufficient net worth, in an amount determined by the department, to be financially responsible for potential losses. The department shall annually determine the minimum net worth sufficient to satisfy this subparagraph as determined annually by the department, pursuant to rules adopted $\frac{1}{2}$ promulgated by the department, with the assistance of the Office of Insurance Regulation of the Financial Services Commission, to be financially responsible for potential losses. The rules must consider any shall take into consideration excess insurance carried by the applicant. The department's determination must shall be based upon reasonable actuarial principles considering the frequency, severity, and loss development of claims incurred by casualty insurers writing coverage on the type of motor

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vehicles for which a certificate of self-insurance is desired.

- (c) The owner of a commercial motor vehicle, as defined in s. 207.002 or s. 320.01, may qualify as a self-insurer subject to the standards provided for in subparagraph (b) 2.
- (2) The self-insurance certificate must shall provide limits of liability insurance in the amounts specified under s. 324.021(7) or s. 627.7415 and shall provide personal injury protection coverage under s. 627.733(3)(b).

Section 24. Section 324.251, Florida Statutes, is amended to read:

324.251 Short title.—This chapter may be cited as the "Financial Responsibility Law of 2018 1955" and is shall become effective at 12:01 a.m., January 1, 2019 October 1, 1955.

Section 25. Subsection (4) of section 400.9905, Florida Statutes, is amended to read:

400.9905 Definitions.

- (4) (a) "Clinic" means an entity where health care services are provided to individuals and which tenders charges for reimbursement for such services, including a mobile clinic and a portable equipment provider. As used in this part, the term does not include and the licensure requirements of this part do not apply to:
- 1. (a) Entities licensed or registered by the state under chapter 395; entities licensed or registered by the state and providing only health care services within the scope of services authorized under their respective licenses under ss. 383.30-383.335, chapter 390, chapter 394, chapter 397, this chapter except part X, chapter 429, chapter 463, chapter 465, chapter 466, chapter 478, part I of chapter 483, chapter 484, or chapter

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

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

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

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

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

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

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

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

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

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

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

11. (k) Entities that provide licensed practitioners to staff emergency departments or to deliver anesthesia services in facilities licensed under chapter 395 and that derive at least 90 percent of their gross annual revenues from the provision of such services. Entities claiming an exemption from licensure under this paragraph must provide documentation demonstrating compliance.

12. (1) Orthotic, prosthetic, pediatric cardiology, or perinatology clinical facilities or anesthesia clinical facilities that are not otherwise exempt under paragraph (a) or paragraph (k) and that are a publicly traded corporation or are wholly owned, directly or indirectly, by a publicly traded corporation. As used in this paragraph, a publicly traded corporation is a corporation that issues securities traded on an exchange registered with the United States Securities and Exchange Commission as a national securities exchange.

13. (m) Entities that are owned by a corporation that has \$250 million or more in total annual sales of health care services provided by licensed health care practitioners where one or more of the persons responsible for the operations of the

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entity is a health care practitioner who is licensed in this state and who is responsible for supervising the business activities of the entity and is responsible for the entity's compliance with state law for purposes of this part.

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

(b) Notwithstanding this subsection, an entity shall be

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1113 deemed a clinic and must be licensed under this part in order to receive medical payments coverage reimbursement under s. 1114 627.7265 unless the entity is: the Florida Motor Vehicle No-1115 1116 Fault Law, ss. 627.730-627.7405, unless exempted under s. 1117 627.736(5)(h). 1118

- 1. Wholly owned by a physician licensed under chapter 458 or chapter 459, or by the physician and the spouse, parent, child, or sibling of the physician;
- 2. Wholly owned by a dentist licensed under chapter 466, or by the dentist and the spouse, parent, child, or sibling of the dentist;
- 3. Wholly owned by a chiropractic physician licensed under chapter 460, or by the chiropractic physician and the spouse, parent, child, or sibling of the chiropractic physician;
- 4. A hospital or ambulatory surgical center licensed under chapter 395;
- 5. An entity that wholly owns or is wholly owned, directly or indirectly, by a hospital or hospitals licensed under chapter 395;
- 6. Is a clinical facility affiliated with an accredited medical school at which training is provided for medical students, residents, or fellows;
 - 7. Is certified under 42 C.F.R. part 485, subpart H; or
- 8. Is owned by a publicly traded corporation, either directly or indirectly through its subsidiaries, which has \$250 million or more in total annual sales of health care services provided by licensed health care practitioners, if one or more of the persons responsible for the operations of the entity are health care practitioners who are licensed in this state and are



1142 responsible for supervising the business activities of the entity and the entity's compliance with state law for purposes 1143 1144 of this section.

Section 26. Subsection (6) of section 400.991, Florida Statutes, is amended to read:

400.991 License requirements; background screenings; prohibitions.-

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

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

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1171 application or document, commits insurance fraud, as 1172 defined in s. 817.234, Florida Statutes. Section 27. Paragraph (g) of subsection (1) of section 1173

400.9935, Florida Statutes, is amended to read:

400.9935 Clinic responsibilities.-

- (1) Each clinic shall appoint a medical director or clinic director who shall agree in writing to accept legal responsibility for the following activities on behalf of the clinic. The medical director or the clinic director shall:
- (q) Conduct systematic reviews of clinic billings to ensure that the billings are not fraudulent or unlawful. Upon discovery of an unlawful charge, the medical director or clinic director shall take immediate corrective action. If the clinic performs only the technical component of magnetic resonance imaging, static radiographs, computed tomography, or positron emission tomography, and provides the professional interpretation of such services, in a fixed facility that is accredited by a national accrediting organization that is approved by the Centers for Medicare and Medicaid Services for magnetic resonance imaging and advanced diagnostic imaging services and if, in the preceding quarter, the percentage of scans performed by that clinic which was billed to motor vehicle all personal injury protection insurance carriers under medical payments coverage was less than 15 percent, the chief financial officer of the clinic may, in a written acknowledgment provided to the agency, assume the responsibility for the conduct of the systematic reviews of clinic billings to ensure that the billings are not fraudulent or unlawful.

Section 28. Subsection (28) of section 409.901, Florida

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1200 Statutes, is amended to read: 1201 409.901 Definitions; ss. 409.901-409.920.—As used in ss. 1202 409.901-409.920, except as otherwise specifically provided, the 1203 term:

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

Section 29. Paragraph (f) of subsection (11) of section 409.910, Florida Statutes, is amended to read:

- 409.910 Responsibility for payments on behalf of Medicaideligible persons when other parties are liable.-
- (11) The agency may, as a matter of right, in order to enforce its rights under this section, institute, intervene in,

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or join any legal or administrative proceeding in its own name in one or more of the following capacities: individually, as subrogee of the recipient, as assignee of the recipient, or as lienholder of the collateral.

- (f) Notwithstanding any provision in this section to the contrary, in the event of an action in tort against a third party in which the recipient or his or her legal representative is a party which results in a judgment, award, or settlement from a third party, the amount recovered shall be distributed as follows:
- 1. After attorney attorney's fees and taxable costs as defined by the Florida Rules of Civil Procedure, one-half of the remaining recovery shall be paid to the agency up to the total amount of medical assistance provided by Medicaid.
- 2. The remaining amount of the recovery shall be paid to the recipient.
- 3. For purposes of calculating the agency's recovery of medical assistance benefits paid, the fee for services of an attorney retained by the recipient or his or her legal representative shall be calculated at 25 percent of the judgment, award, or settlement.
- 4. Notwithstanding any other provision of this section to the contrary, the agency shall be entitled to all medical coverage benefits up to the total amount of medical assistance provided by Medicaid. For purposes of this paragraph, the term "medical coverage" means any benefits under health insurance, a health maintenance organization, a preferred provider arrangement, or a prepaid health clinic, and the portion of benefits designated for medical payments under coverage for

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workers' compensation coverage, motor vehicle insurance coverage, personal injury protection, and casualty coverage.

Section 30. Paragraph (k) of subsection (2) of section 456.057, Florida Statutes, is amended to read:

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

- (2) As used in this section, the terms "records owner," "health care practitioner," and "health care practitioner's employer" do not include any of the following persons or entities; furthermore, the following persons or entities are not authorized to acquire or own medical records, but are authorized under the confidentiality and disclosure requirements of this section to maintain those documents required by the part or chapter under which they are licensed or regulated:
- (k) Persons or entities practicing under s. 627.7265 s. 627.736(7).

Section 31. Paragraphs (ee) and (ff) of subsection (1) of section 456.072, Florida Statutes, are amended to read:

456.072 Grounds for discipline; penalties; enforcement.

- (1) The following acts shall constitute grounds for which the disciplinary actions specified in subsection (2) may be taken:
- (ee) With respect to making a medical payments coverage personal injury protection claim under s. 627.7265 as required by s. 627.736, intentionally submitting a claim, statement, or bill that has been upcoded. As used in this paragraph, the term "upcoded" means an action that submits a billing code that would result in payment greater in amount than would be paid using a billing code that accurately describes the services performed.

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The term does not include an otherwise lawful bill by a magnetic resonance imaging facility, which globally combines both technical and professional components, if the amount of the global bill is not more than the components if billed separately; however, payment of such a bill constitutes payment in full for all components of such service "upcoded" as defined in s. 627.732.

(ff) With respect to making a medical payments coverage personal injury protection claim as required under s. 627.7265 by s. 627.736, intentionally submitting a claim, statement, or bill for payment of services that were not rendered.

Section 32. Paragraphs (i) and (o) of subsection (1) of section 626.9541, Florida Statutes, are amended to read:

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

- (1) UNFAIR METHODS OF COMPETITION AND UNFAIR OR DECEPTIVE ACTS.-The following are defined as unfair methods of competition and unfair or deceptive acts or practices:
 - (i) Unfair claim settlement practices.-
- 1. Attempting to settle claims on the basis of an application, when serving as a binder or intended to become a part of the policy, or any other material document which was altered without notice to, or knowledge or consent of, the insured;
- 2. A material misrepresentation made to an insured or any other person having an interest in the proceeds payable under such contract or policy, for the purpose and with the intent of effecting settlement of such claims, loss, or damage under such contract or policy on less favorable terms than those provided

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in, and contemplated by, such contract or policy; or

- 3. Committing or performing with such frequency as to indicate a general business practice any of the following:
- a. Failing to adopt and implement standards for the proper investigation of claims;
- b. Misrepresenting pertinent facts or insurance policy provisions relating to coverages at issue;
- c. Failing to acknowledge and act promptly upon communications with respect to claims;
- d. Denying claims without conducting reasonable investigations based upon available information;
- e. Failing to affirm or deny full or partial coverage of claims, and, as to partial coverage, the dollar amount or extent of coverage, or failing to provide a written statement that the claim is being investigated, upon the written request of the insured within 30 days after proof-of-loss statements have been completed;
- f. Failing to promptly provide a reasonable explanation in writing to the insured of the basis in the insurance policy, in relation to the facts or applicable law, for denial of a claim or for the offer of a compromise settlement;
- g. Failing to promptly notify the insured of any additional information necessary for the processing of a claim; or
- h. Failing to clearly explain the nature of the requested information and the reasons why such information is necessary.
- i. Failing to pay personal injury protection insurance claims within the time periods required by s. 627.736(4)(b). The office may order the insurer to pay restitution to a policyholder, medical provider, or other claimant, including

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interest at a rate consistent with the amount set forth in s. 55.03(1), for the time period within which an insurer fails to pay claims as required by law. Restitution is in addition to any other penalties allowed by law, including, but not limited to, the suspension of the insurer's certificate of authority.

- 4. Failing to pay undisputed amounts of partial or full benefits owed under first-party property insurance policies within 90 days after an insurer receives notice of a residential property insurance claim, determines the amounts of partial or full benefits, and agrees to coverage, unless payment of the undisputed benefits is prevented by an act of God, prevented by the impossibility of performance, or due to actions by the insured or claimant that constitute fraud, lack of cooperation, or intentional misrepresentation regarding the claim for which benefits are owed.
- (o) Illegal dealings in premiums; excess or reduced charges for insurance.-
- 1. Knowingly collecting any sum as a premium or charge for insurance, which is not then provided, or is not in due course to be provided, subject to acceptance of the risk by the insurer, by an insurance policy issued by an insurer as permitted by this code.
- 2. Knowingly collecting as a premium or charge for insurance any sum in excess of or less than the premium or charge applicable to such insurance, in accordance with the applicable classifications and rates as filed with and approved by the office, and as specified in the policy; or, in cases when classifications, premiums, or rates are not required by this code to be so filed and approved, premiums and charges collected

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

- 3.a. Imposing or requesting an additional premium for bodily injury liability coverage, property damage liability coverage a policy of motor vehicle liability, personal injury protection, medical payment coverage, or collision coverage in a motor vehicle liability insurance policy insurance or any combination thereof or refusing to renew the policy solely because the insured was involved in a motor vehicle accident unless the insurer's file contains information from which the insurer in good faith determines that the insured was substantially at fault in the accident.
- b. An insurer which imposes and collects such a surcharge or which refuses to renew such policy shall, in conjunction with the notice of premium due or notice of nonrenewal, notify the named insured that he or she is entitled to reimbursement of

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such amount or renewal of the policy under the conditions listed below and will subsequently reimburse him or her or renew the policy, if the named insured demonstrates that the operator involved in the accident was:

- (I) Lawfully parked;
- (II) Reimbursed by, or on behalf of, a person responsible for the accident or has a judgment against such person;
- (III) Struck in the rear by another vehicle headed in the same direction and was not convicted of a moving traffic violation in connection with the accident;
- (IV) Hit by a "hit-and-run" driver, if the accident was reported to the proper authorities within 24 hours after discovering the accident;
- (V) Not convicted of a moving traffic violation in connection with the accident, but the operator of the other automobile involved in such accident was convicted of a moving traffic violation;
- (VI) Finally adjudicated not to be liable by a court of competent jurisdiction;
- (VII) In receipt of a traffic citation which was dismissed or nolle prossed; or
- (VIII) Not at fault as evidenced by a written statement from the insured establishing facts demonstrating lack of fault which are not rebutted by information in the insurer's file from which the insurer in good faith determines that the insured was substantially at fault.
- c. In addition to the other provisions of this subparagraph, an insurer may not fail to renew a policy if the insured has had only one accident in which he or she was at

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1432 fault within the current 3-year period. However, an insurer may nonrenew a policy for reasons other than accidents in accordance 1433 with s. 627.728. This subparagraph does not prohibit nonrenewal 1434 1435 of a policy under which the insured has had three or more 1436 accidents, regardless of fault, during the most recent 3-year 1437 period.

- 4. Imposing or requesting an additional premium for, or refusing to renew, a policy for motor vehicle insurance solely because the insured committed a noncriminal traffic infraction as described in s. 318.14 unless the infraction is:
- a. A second infraction committed within an 18-month period, or a third or subsequent infraction committed within a 36-month period.
- b. A violation of s. 316.183, when such violation is a result of exceeding the lawful speed limit by more than 15 miles per hour.
- 5. Upon the request of the insured, the insurer and licensed agent shall supply to the insured the complete proof of fault or other criteria which justifies the additional charge or cancellation.
- 6. No insurer shall impose or request an additional premium for motor vehicle insurance, cancel or refuse to issue a policy, or refuse to renew a policy because the insured or the applicant is a handicapped or physically disabled person, so long as such handicap or physical disability does not substantially impair such person's mechanically assisted driving ability.
- 7. No insurer may cancel or otherwise terminate any insurance contract or coverage, or require execution of a consent to rate endorsement, during the stated policy term for

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the purpose of offering to issue, or issuing, a similar or identical contract or coverage to the same insured with the same exposure at a higher premium rate or continuing an existing contract or coverage with the same exposure at an increased premium.

- 8. No insurer may issue a nonrenewal notice on any insurance contract or coverage, or require execution of a consent to rate endorsement, for the purpose of offering to issue, or issuing, a similar or identical contract or coverage to the same insured at a higher premium rate or continuing an existing contract or coverage at an increased premium without meeting any applicable notice requirements.
- 9. No insurer shall, with respect to premiums charged for motor vehicle insurance, unfairly discriminate solely on the basis of age, sex, marital status, or scholastic achievement.
- 10. Imposing or requesting an additional premium for motor vehicle comprehensive or uninsured motorist coverage solely because the insured was involved in a motor vehicle accident or was convicted of a moving traffic violation.
- 11. No insurer shall cancel or issue a nonrenewal notice on any insurance policy or contract without complying with any applicable cancellation or nonrenewal provision required under the Florida Insurance Code.
- 12. No insurer shall impose or request an additional premium, cancel a policy, or issue a nonrenewal notice on any insurance policy or contract because of any traffic infraction when adjudication has been withheld and no points have been assessed pursuant to s. 318.14(9) and (10). However, this subparagraph does not apply to traffic infractions involving

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accidents in which the insurer has incurred a loss due to the fault of the insured.

Section 33. Paragraph (a) of subsection (1) of section 626.989, Florida Statutes, is amended to read:

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

- (1) For the purposes of this section:
- (a) A person commits a "fraudulent insurance act" if the person:
- 1. Knowingly and with intent to defraud presents, causes to be presented, or prepares with knowledge or belief that it will be presented, to or by an insurer, self-insurer, self-insurance fund, servicing corporation, purported insurer, broker, or any agent thereof, any written statement as part of, or in support of, an application for the issuance of, or the rating of, any insurance policy, or a claim for payment or other benefit pursuant to any insurance policy, which the person knows to contain materially false information concerning any fact material thereto or if the person conceals, for the purpose of misleading another, information concerning any fact material thereto.
 - 2. Knowingly submits:
- a. A false, misleading, or fraudulent application or other document when applying for licensure as a health care clinic, seeking an exemption from licensure as a health care clinic, or demonstrating compliance with part X of chapter 400 with an intent to use the license, exemption from licensure, or

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demonstration of compliance to provide services or seek reimbursement under a motor vehicle liability insurance policy's medical payments coverage the Florida Motor Vehicle No-Fault Law.

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

Section 34. Subsection (1) of section 627.06501, Florida Statutes, is amended to read:

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

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

Section 35. Subsection (1) of section 627.0652, Florida



Statutes, is amended to read:

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627.0652 Insurance discounts for certain persons completing safety course.-

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

Section 36. Subsections (1), (3), and (6) of section 627.0653, Florida Statutes, are amended to read:

627.0653 Insurance discounts for specified motor vehicle equipment.-

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

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

Section 37. Section 627.4132, Florida Statutes, is amended to read:

- 627.4132 Stacking of coverages prohibited.—If an insured or named insured is protected by any type of motor vehicle insurance policy for bodily injury and property damage liability, personal injury protection, or other coverage, the policy must shall provide that the insured or named insured is protected only to the extent of the coverage she or he has on the vehicle involved in the accident. However, if none of the insured's or named insured's vehicles are is involved in the accident, coverage is available only to the extent of coverage on any one of the vehicles with applicable coverage. Coverage on any other vehicles may shall not be added to or stacked upon that coverage. This section does not apply:
- (1) To uninsured motorist coverage that which is separately governed by s. 627.727.
- (2) To reduce the coverage available by reason of insurance policies insuring different named insureds.

Section 38. Section 627.7263, Florida Statutes, is amended to read:



627.7263 Rental and leasing driver's insurance to be primary; exception.-

- (1) The valid and collectible liability insurance and medical payments coverage or personal injury protection insurance providing coverage for the lessor of a motor vehicle for rent or lease is primary unless otherwise stated in at least 10-point type on the face of the rental or lease agreement. Such insurance is primary for the limits of liability and personal injury protection coverage as required by s. 324.021(7) and medical payments coverage as required under s. 627.7265 ss. 324.021(7) and 627.736.
- (2) If the lessee's coverage is to be primary, the rental or lease agreement must contain the following language, in at least 10-point type:

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"The valid and collectible liability insurance and medical payments coverage personal injury protection insurance of an any authorized rental or leasing driver is primary for the limits of liability and personal injury protection coverage and medical payments coverage required under ss. 324.021(7) and 627.7265 by ss. 324.021(7) and 627.736, Florida Statutes."

Section 39. Section 627.7265, Florida Statutes, is created to read:

- 627.7265 Motor vehicle insurance; medical payments coverage.-
- 1633 (1) MEDICAL PAYMENTS COVERAGE REQUIRED.—A motor vehicle liability insurance policy that is furnished as proof of 1634

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financial responsibility pursuant to s. 324.031 must include medical payments coverage as provided in this section. The medical payments coverage must protect the named insured, resident relatives, persons operating the insured motor vehicle, passengers in the insured motor vehicle, and persons who are struck by the insured motor vehicle and suffer bodily injury while not an occupant of a self-propelled motor vehicle, to a limit of at least \$5,000 per person for medical expense incurred due to bodily injury, sickness, or disease arising out of the ownership, maintenance, or use of a motor vehicle. The medical payments coverage must also provide each such person with a death benefit of at least \$5,000. This section may not be construed to limit any other coverage made available by an insurer. An insurer may not offer medical payments coverage with a deductible to an applicant or policyholder.

- (2) REQUIRED BENEFITS.—Medical payments coverage must provide coverage for all of the following if medically necessary and the individual initially receives such treatment within 14 days after the motor vehicle accident:
- (a) Emergency transport and treatment by a provider licensed under chapter 401.
- (b) Emergency services and care provided by a hospital licensed under chapter 395.
- (c) Emergency services and care as defined in s. 395.002, provided in a facility licensed under chapter 395 and rendered by a physician or dentist, and related hospital inpatient services rendered by a physician or dentist.
- (d) Hospital inpatient services, other than emergency services and care.



1664 (e) Hospital outpatient services, other than emergency 1665 services and care. (f) Physician services and care provided by a physician 1666 1667 licensed under chapter 458 or chapter 459 or a chiropractic 1668 physician licensed under chapter 460; dental services and care 1669 provided by a dentist licensed under chapter 466; or, to the 1670 extent permitted by applicable law and under the supervision of 1671 such physician, osteopathic physician, chiropractic physician, 1672 or dentist, services and care provided by a physician assistant 1673 licensed under chapter 458 or chapter 459 or by an advanced 1674 registered nurse practitioner licensed under chapter 464. 1675 (3) AUTHORIZED EXCLUSIONS.—Notwithstanding any other requirement in this section, an insurer may exclude medical 1676 1677 payment benefits: 1678 (a) For injury sustained by the named insured or a resident 1679 relative while occupying another motor vehicle owned by the 1680 named insured and not insured under the policy, unless such 1681 vehicle qualifies as a newly acquired vehicle or temporary 1682 substitute vehicle. 1683 (b) For injury sustained by any person operating the 1684 insured motor vehicle without the express or implied consent of 1685 the insured. 1686 (c) For any person who intentionally causes injury to 1687 himself or herself. 1688 (d) For any person injured while committing a felony. 1689 (4) PAYMENT OF BENEFITS.-1690 (a) Benefits due from an insurer under medical payments

coverage are primary to any health insurance benefit of a person injured in a motor vehicle accident and apply to any coinsurance

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or deductible amount required by the injured person's health insurance policy, except that:

- 1. Benefits received under any workers' compensation law must be credited against medical payments coverage benefits, and are due and payable as losses accrue, upon reasonable proof of such losses and the amount of expenses and losses incurred which are covered by the policy issued under this section.
- 2. When the Agency for Health Care Administration provides, pays for, or becomes liable for medical assistance under the Medicaid program which is related to injury, sickness, disease, or death arising out of the ownership, maintenance, or use of a motor vehicle, medical payments benefits are subject to the provisions of the Medicaid program, and, within 30 days after receiving notice that the Medicaid program paid such benefits, the insurer must repay the full amount of the benefits to the Medicaid program.
- (b) A medical payments insurance policy may include a provision allowing subrogation for medical payments benefits paid, if the expenses giving rise to the payments were caused by wrongful act or omission of another.
- (c) Upon receiving notice of an accident that is potentially covered by medical payments coverage benefits, the insurer must reserve \$2,500 of medical payments coverage benefits for payment to physicians licensed under chapter 458 or chapter 459 or dentists licensed under chapter 466 who provide emergency services and care, as defined in s. 395.002, or who provide hospital inpatient care. The amount required to be held in reserve may be used only to pay claims from such physicians or dentists until 30 days after the date the insurer receives

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notice of the accident. After the 30-day period, any amount of the reserve for which the insurer has not received notice of such claims may be used by the insurer to pay other claims. This paragraph does not require an insurer to establish a claim reserve for insurance accounting purposes.

- (5) CHARGES FOR CARE OF INJURED PERSONS.-
- (a) A physician, hospital, clinic, or other person or institution lawfully providing medical care to an injured person for a bodily injury covered by medical payments coverage may charge the insurer and injured party only a reasonable amount pursuant to this section. However, such charges may not exceed the amount the person or institution customarily charges for like medical care. In determining whether a charge for a particular service, treatment, supply, or prescription is reasonable, consideration may be given to evidence of usual and customary charges and payments accepted by the provider involved in the dispute; reimbursement levels in the community and various federal and state medical fee schedules applicable to motor vehicle and other insurance coverages; and other information relevant to the reasonableness of the reimbursement for the service, treatment, supply, or prescription.
- 1. The insurer may limit reimbursement to the following schedule of maximum charges:
- a. For emergency transport and treatment by providers licensed under chapter 401, 200 percent of Medicare.
- b. For emergency services and care provided by a hospital licensed under chapter 395, 75 percent of the hospital's usual and customary charges.
 - c. For emergency services and care, as defined in s.

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- 1751 395.002, provided in a facility licensed under chapter 395 and rendered by a physician or dentist, and related hospital 1752 1753 inpatient services rendered by a physician or dentist, the usual 1754 and customary charges in the community. 1755 d. For hospital inpatient services other than emergency services and care, 200 percent of the Medicare Part A 1756 1757 prospective payment applicable to the specific hospital 1758 providing the inpatient services. 1759
 - e. For hospital outpatient services other than emergency services and care, 200 percent of the Medicare Part A Ambulatory Payment Classification for the specific hospital providing the outpatient services.
 - f. For all other medical services, supplies, and care, 200 percent of the allowable amount under:
 - (I) The participating physician fee schedule of Medicare Part B, except as provided in sub-sub-subparagraphs (II) and (III).
 - (II) Medicare Part B, in the case of services, supplies, and care provided by ambulatory surgical centers and clinical laboratories.
 - (III) The Durable Medical Equipment Prosthetics/Orthotics and Supplies fee schedule of Medicare Part B, in the case of durable medical equipment.

However, if such services, supplies, or care is not reimbursable under Medicare Part B as provided in this sub-subparagraph, the insurer may limit reimbursement to 80 percent of the maximum reimbursable allowance under workers' compensation. Services, supplies, or care that is not reimbursable under Medicare or

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workers' compensation is not required to be reimbursed by the insurer.

- 2. For purposes of subparagraph 1., the applicable fee schedule or payment limitation under Medicare is the fee schedule or payment limitation in effect on March 1 of the service year in which the services, supplies, or care is rendered and for the area in which the services, supplies, or care is rendered. The applicable fee schedule or payment limitation applies to services, supplies, or care rendered during that service year notwithstanding any subsequent change made to the fee schedule or payment limitation; however, it may not be less than the allowable amount under the applicable schedule of Medicare Part B for 2007 for medical services, supplies, and care subject to Medicare Part B. For purposes of this subparagraph, the term "service year" means the period from March 1 through the end of February of the following year.
- 3. For purposes of subparagraph 1., the applicable fee schedule or payment limitation under workers' compensation is determined under s. 440.13 and rules adopted thereunder which are in effect at the time such services, supplies, or care is provided.
- 4. Subparagraph 1. does not authorize the insurer to apply any limitation on the number of treatments or other utilization limits that apply under Medicare or workers' compensation. An insurer that applies the allowable payment limitations of subparagraph 1. must reimburse a provider who lawfully provided medical care under the scope of his or her license, regardless of whether the provider is entitled to reimbursement under Medicare or workers' compensation due to restrictions or

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limitations on the types or discipline of health care providers who may be reimbursed for particular procedures or procedure codes. However, subparagraph 1. does not prohibit an insurer from using the Medicare coding policies and payment methodologies of the federal Centers for Medicare and Medicaid Services, including applicable modifiers, to determine the appropriate amount of reimbursement for medical services, supplies, or care, if the coding policy or payment methodology does not constitute a utilization limit.

- 5. If an insurer limits payment as authorized by subparagraph 1., the person providing such medical care may not bill or attempt to collect from the insured any amount in excess of such limits, except for amounts that are not covered by the insured's medical payments benefits due to the maximum policy limits.
- 6. An insurer may limit payment as authorized by this paragraph only if the insurance policy includes a notice at the time of issuance or renewal that the insurer may limit payment pursuant to the schedule of charges specified in this paragraph. A policy form approved by the office satisfies this requirement. If a provider submits a charge for an amount less than the amount allowed under subparagraph 1., the insurer may pay the amount of the charge submitted.
- (b) 1. An insurer or insured is not required to pay a claim or charges:
- a. For any service or treatment that was not lawful at the time rendered;
- b. To any person who knowingly submits a false or misleading statement relating to the claim or charges; or

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- c. For any treatment or service that is upcoded or that is unbundled when the treatment or services should be bundled. To facilitate prompt payment of lawful services, an insurer may change codes that it determines have been improperly or incorrectly upcoded or unbundled and may make payment based on the changed codes, without affecting the right of the provider to dispute the change by the insurer, if, before doing so, the insurer contacts the health care provider and discusses the reasons for the insurer's change and the health care provider's reason for the coding, or makes a reasonable good faith effort to do so, as documented in the insurer's file.
- 2. The Department of Health, in consultation with the appropriate professional licensing boards, shall adopt by rule a list of diagnostic tests deemed not to be medically necessary for use in the treatment of persons sustaining bodily injury covered by medical payments benefits under this section. The list must be revised from time to time as determined by the Department of Health in consultation with the respective professional licensing boards. Inclusion of a test on the list must be based on a lack of demonstrated medical value and a level of general acceptance by the relevant provider community and may not be dependent on results based entirely upon subjective patient response. Notwithstanding its inclusion on a fee schedule in this subsection, an insurer or insured is not required to pay any charges or reimburse claims for an invalid diagnostic test as determined by the Department of Health.
- (c) With respect to any medical care other than medical services billed by a hospital or other provider for emergency services and care, as defined in s. 395.002, or inpatient



1867 services rendered at a hospital-owned facility, the statement of 1868 charges must be furnished to the insurer by the provider. (d) All statements and bills for medical services rendered 1869 1870 by a physician, hospital, clinic, or other person or institution 1871 must be submitted to the insurer on a properly completed Centers 1872 for Medicare and Medicaid Services Form CMS-1500, a UB-92 form, or any other standard form approved by the office and adopted by 1873 1874 the commission for purposes of this paragraph. All billings for 1875 such services rendered by providers must, to the extent 1876 applicable, comply with the Form CMS-1500 instructions, the 1877 codes established by the American Medical Association's Current 1878 Procedural Terminology Editorial Panel, and the Healthcare 1879 Common Procedure Coding System (HCPCS) and must follow the 1880 Physicians' Current Procedural Terminology (CPT), the HCPCS in 1881 effect for the year in which services are rendered, and the 1882 International Classification of Diseases adopted by the United 1883 States Department of Health and Human Services in effect for the 1884 year in which services are rendered. The guidance for 1885 determining compliance with applicable CPT and HCPCS coding must 1886 be provided by the CPT or the HCPCS in effect for the year in 1887 which services were rendered, the Office of the Inspector 1888 General, Physicians Compliance Guidelines, and other 1889 authoritative treatises designated by rule by the Agency for Health Care Administration. A statement of medical services may 1890 1891 not include charges for medical services of a person or entity 1892 that performed such services without possessing the valid 1893 licenses required to perform such services. 1894 (6) CIVIL ACTION FOR INSURANCE FRAUD.—An insurer has a cause of action against any person convicted of, or who, 1895

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regardless of adjudication of guilt, pleads guilty or nolo contendere to, insurance fraud under s. 817.234, patient brokering under s. 817.505, or kickbacks under s. 456.054, associated with a claim for medical payments coverage benefits in accordance with this section. An insurer prevailing in an action brought under this subsection may recover compensatory, consequential, and punitive damages subject to the requirements and limitations of part II of chapter 768 and attorney fees and costs incurred in litigating a cause of action against any person convicted of, or who, regardless of adjudication of guilt, pleads guilty or nolo contendere to, insurance fraud under s. 817.234, patient brokering under s. 817.505, or kickbacks under s. 456.054, associated with a claim for medical payments coverage benefits in accordance with this section. (7) FRAUD ADVISORY NOTICE. - Upon receiving notice of a claim under this section, an insurer shall provide a notice to the

- insured or to a person for whom a claim for reimbursement for diagnosis or treatment of injuries has been filed, advising that:
- (a) Pursuant to s. 626.9892, the department may pay rewards of up to \$25,000 to persons who provide information leading to the arrest and conviction of persons committing crimes investigated by the Division of Investigative and Forensic Services arising from violations of s. 440.105, s. 624.15, s. 626.9541, s. 626.989, or s. 817.234.
- (b) Solicitation of a person injured in a motor vehicle crash for purposes of filing medical payments coverage or tort claims could be a violation of s. 817.234, s. 817.505, or the rules regulating The Florida Bar and should be immediately

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reported to the Division of Investigative and Forensic Services if such conduct has taken place.

- (8) NONREIMBURSABLE CLAIMS.—Claims generated as a result of activities that are unlawful pursuant to s. 817.505 are not reimbursable.
- (9) SECURE ELECTRONIC DATA TRANSFER.—A notice, documentation, transmission, or communication of any kind required or authorized under this section may be transmitted electronically if it is transmitted by secure electronic data transfer that is consistent with state and federal privacy and security laws.

Section 40. Subsections (1) and (7) of section 627.727, Florida Statutes, are amended, and present subsections (8), (9), and (10) of that section are redesignated as subsections (7), (8), and (9), respectively, to read:

- 627.727 Motor vehicle insurance; uninsured and underinsured vehicle coverage; insolvent insurer protection.-
- (1) A No motor vehicle liability insurance policy that which provides bodily injury liability coverage may not shall be delivered or issued for delivery in this state with respect to any specifically insured or identified motor vehicle registered or principally garaged in this state, unless uninsured motor vehicle coverage is provided therein or supplemental thereto for the protection of persons insured thereunder who are legally entitled to recover damages from owners or operators of uninsured motor vehicles because of bodily injury, sickness, or disease, including death, resulting therefrom. However, the coverage required under this section is not applicable if when, or to the extent that, an insured named in the policy makes a

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written rejection of the coverage on behalf of all insureds under the policy. If When a motor vehicle is leased for a period of 1 year or longer and the lessor of such vehicle, by the terms of the lease contract, provides liability coverage on the leased vehicle, the lessee of such vehicle has shall have the sole privilege to reject uninsured motorist coverage or to select lower limits than the bodily injury liability limits, regardless of whether the lessor is qualified as a self-insurer pursuant to s. 324.171. Unless an insured, or lessee having the privilege of rejecting uninsured motorist coverage, requests such coverage or requests higher uninsured motorist limits in writing, the coverage or such higher uninsured motorist limits need not be provided in or supplemental to any other policy which renews, extends, changes, supersedes, or replaces an existing policy with the same bodily injury liability limits when an insured or lessee had rejected the coverage. When an insured or lessee has initially selected limits of uninsured motorist coverage lower than her or his bodily injury liability limits, higher limits of uninsured motorist coverage need not be provided in or supplemental to any other policy that which renews, extends, changes, supersedes, or replaces an existing policy with the same bodily injury liability limits unless an insured requests higher uninsured motorist coverage in writing. The rejection or selection of lower limits must shall be made on a form approved by the office. The form must shall fully advise the applicant of the nature of the coverage and must shall state that the coverage is equal to bodily injury liability limits unless lower limits are requested or the coverage is rejected. The heading of the form must shall be in 12-point bold type and must shall

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state: "You are electing not to purchase certain valuable coverage that which protects you and your family or you are purchasing uninsured motorist limits less than your bodily injury liability limits when you sign this form. Please read carefully." If this form is signed by a named insured, it will be conclusively presumed that there was an informed, knowing rejection of coverage or election of lower limits on behalf of all insureds. The insurer shall notify the named insured at least annually of her or his options as to the coverage required by this section. Such notice must shall be part of, and attached to, the notice of premium, must shall provide for a means to allow the insured to request such coverage, and must shall be given in a manner approved by the office. Receipt of this notice does not constitute an affirmative waiver of the insured's right to uninsured motorist coverage if where the insured has not signed a selection or rejection form. The coverage described under this section must shall be over and above, but may shall not duplicate, the benefits available to an insured under any workers' compensation law, personal injury protection benefits, disability benefits law, or similar law; under any automobile medical payments expense coverage; under any motor vehicle liability insurance coverage; or from the owner or operator of the uninsured motor vehicle or any other person or organization jointly or severally liable together with such owner or operator for the accident; and such coverage must shall cover the difference, if any, between the sum of such benefits and the damages sustained, up to the maximum amount of such coverage provided under this section. The amount of coverage available under this section may shall not be reduced by a setoff against

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any coverage, including liability insurance. Such coverage does shall not inure directly or indirectly to the benefit of any workers' compensation or disability benefits carrier or any person or organization qualifying as a self-insurer under any workers' compensation or disability benefits law or similar law.

(7) The legal liability of an uninsured motorist coverage insurer does not include damages in tort for pain, suffering, mental anguish, and inconvenience unless the injury or disease is described in one or more of paragraphs (a) - (d) of s. 627.737(2).

Section 41. Subsection (1) and paragraphs (a) and (b) of subsection (2) of section 627.7275, Florida Statutes, are amended to read:

627.7275 Motor vehicle liability.-

- (1) A motor vehicle insurance policy providing personal injury protection as set forth in s. 627.736 may not be delivered or issued for delivery in this state for a with respect to any specifically insured or identified motor vehicle registered or principally garaged in this state must provide bodily injury liability coverage and unless the policy also provides coverage for property damage liability coverage as required under by s. 324.022, and medical payments coverage as required under s. 627.7265.
- (2) (a) Insurers writing motor vehicle insurance in this state shall make available, subject to the insurers' usual underwriting restrictions:
- 1. Coverage under policies as described in subsection (1) to an applicant for private passenger motor vehicle insurance coverage who is seeking the coverage in order to reinstate the

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applicant's driving privileges in this state if the driving privileges were revoked or suspended pursuant to s. 316.646 or s. 324.0221 due to the failure of the applicant to maintain required security.

- 2. Coverage under policies as described in subsection (1), which includes bodily injury also provides liability coverage and property damage liability coverage for bodily injury, death, and property damage arising out of the ownership, maintenance, or use of the motor vehicle in an amount not less than the minimum limits required under described in s. 324.021(7) or s. 324.023 and which conforms to the requirements of s. 324.151, to an applicant for private passenger motor vehicle insurance coverage who is seeking the coverage in order to reinstate the applicant's driving privileges in this state after such privileges were revoked or suspended under s. 316.193 or s. 322.26(2) for driving under the influence.
- (b) The policies described in paragraph (a) must shall be issued for at least 6 months and, as to the minimum coverages required under this section, may not be canceled by the insured for any reason or by the insurer after 60 days, during which period the insurer is completing the underwriting of the policy. After the insurer has completed underwriting the policy, the insurer shall notify the Department of Highway Safety and Motor Vehicles that the policy is in full force and effect and is not cancelable for the remainder of the policy period. A premium must shall be collected and the coverage is in effect for the 60-day period during which the insurer is completing the underwriting of the policy, whether or not the person's driver license, motor vehicle tag, and motor vehicle registration are

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in effect. Once the noncancelable provisions of the policy become effective, the bodily injury liability and property damage liability coverages for bodily injury, property damage, and personal injury protection may not be reduced below the minimum limits required under s. 324.021 or s. 324.023 during the policy period, and the medical payments coverage may not be reduced below the minimum limit required under s. 627.7265.

Section 42. Paragraph (a) of subsection (1) of section 627.728, Florida Statutes, is amended to read:

- 627.728 Cancellations; nonrenewals.-
- (1) As used in this section, the term:
- (a) "Policy" means the bodily injury and property damage liability, personal injury protection, medical payments, comprehensive, collision, and uninsured motorist coverage portions of a policy of motor vehicle insurance delivered or issued for delivery in this state:
- 1. Insuring a natural person as named insured or one or more related individuals who are residents resident of the same household; and
- 2. Insuring only a motor vehicle of the private passenger type or station wagon type which is not used as a public or livery conveyance for passengers or rented to others; or insuring any other four-wheel motor vehicle having a load capacity of 1,500 pounds or less which is not used in the occupation, profession, or business of the insured other than farming; other than any policy issued under an automobile insurance assigned risk plan or covering garage, automobile sales agency, repair shop, service station, or public parking place operation hazards.



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

Section 43. Subsection (1), paragraph (a) of subsection (5), and subsections (6) and (7) of section 627.7295, Florida Statutes, are amended to read:

- 627.7295 Motor vehicle insurance contracts.-
- (1) As used in this section, the term:
- (a) "Policy" means a motor vehicle insurance policy that provides bodily injury liability personal injury protection coverage, property damage liability coverage, and medical payments coverage or both.
- (b) "Binder" means a binder that provides motor vehicle bodily injury liability coverage, personal injury protection and property damage liability coverage, and medical payments coverage.
- (5)(a) A licensed general lines agent may charge a perpolicy fee up to not to exceed \$10 to cover the administrative costs of the agent associated with selling the motor vehicle insurance policy if the policy covers only bodily injury liability coverage, personal injury protection coverage as provided by s. 627.736 and property damage liability coverage, and medical payments coverage as provided by s. 627.7275 and if no other insurance is sold or issued in conjunction with or collateral to the policy. The fee is not considered part of the premium.
- (6) If a motor vehicle owner's driver license, license plate, and registration have previously been suspended pursuant

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to s. 316.646 or s. 627.733, an insurer may cancel a new policy only as provided in s. 627.7275.

- (7) A policy of private passenger motor vehicle insurance or a binder for such a policy may be initially issued in this state only if, before the effective date of such binder or policy, the insurer or agent has collected from the insured an amount equal to 2 months' premium from the insured. An insurer, agent, or premium finance company may not, directly or indirectly, take any action that results resulting in the insured paying having paid from the insured's own funds an amount less than the 2 months' premium required by this subsection. This subsection applies without regard to whether the premium is financed by a premium finance company or is paid pursuant to a periodic payment plan of an insurer or an insurance agent.
 - (a) This subsection does not apply:
- 1. If an insured or member of the insured's family is renewing or replacing a policy or a binder for such policy written by the same insurer or a member of the same insurer group. This subsection does not apply
- 2. To an insurer that issues private passenger motor vehicle coverage primarily to active duty or former military personnel or their dependents. This subsection does not apply
- 3. If all policy payments are paid pursuant to a payroll deduction plan, an automatic electronic funds transfer payment plan from the policyholder, or a recurring credit card or debit card agreement with the insurer.
 - (b) This subsection and subsection (4) do not apply if: 1. All policy payments to an insurer are paid pursuant to

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an automatic electronic funds transfer payment plan from an agent, a managing general agent, or a premium finance company and if the policy includes, at a minimum, bodily injury liability coverage, personal injury protection pursuant to ss. 627.730-627.7405; motor vehicle property damage liability coverage, and medical payments coverage pursuant to s. 627.7275; or and bodily injury liability in at least the amount of \$10,000 because of bodily injury to, or death of, one person in any one accident and in the amount of \$20,000 because of bodily injury to, or death of, two or more persons in any one accident. This subsection and subsection (4) do not apply if

2. An insured has had a policy in effect for at least 6 months, the insured's agent is terminated by the insurer that issued the policy, and the insured obtains coverage on the policy's renewal date with a new company through the terminated agent.

Section 44. Subsections (1) and (2) of section 627.7415, Florida Statutes, are amended to read:

- 627.7415 Commercial motor vehicles; additional liability insurance coverage. - Commercial motor vehicles, as defined in s. 207.002 or s. 320.01, operated upon the roads and highways of this state shall be insured with the following minimum levels of combined bodily liability insurance and property damage liability insurance under subsections (1) and (2) in addition to any other insurance requirements. +
- (1) Fifty thousand dollars per occurrence For a commercial motor vehicle with a gross vehicle weight of 26,000 pounds or more, but less than 35,000 pounds:
 - (a) Beginning January 1, 2019, through December 31, 2020,



2186 no less than \$50,000 per occurrence. (b) Beginning January 1, 2021, and thereafter, no less than 2187 2188 \$60,000 per occurrence. 2189 (2) One hundred thousand dollars per occurrence For a 2190 commercial motor vehicle with a gross vehicle weight of 35,000 2191 pounds or more, but less than 44,000 pounds: 2192 (a) Beginning January 1, 2019, through December 31, 2020, 2193 no less than \$100,000 per occurrence. 2194 (b) Beginning January 1, 2021, and thereafter, no less than 2195 \$120,000 per occurrence. 2196 A violation of this section is a noncriminal traffic infraction, 2197 2198 punishable as a nonmoving violation as provided in chapter 318. 2199 Section 45. Section 627.8405, Florida Statutes, is amended 2200 to read: 2201 627.8405 Prohibited acts; financing companies.—A No premium 2202 finance company shall, in a premium finance agreement or other 2203 agreement, may not finance the cost of or otherwise provide for 2204 the collection or remittance of dues, assessments, fees, or 2205 other periodic payments of money for the cost of: 2206 (1) A membership in an automobile club. The term "automobile club" means a legal entity that which, in 2207 2208 consideration of dues, assessments, or periodic payments of 2209 money, promises its members or subscribers to assist them in 2210 matters relating to the ownership, operation, use, or 2211 maintenance of a motor vehicle; however, the term this definition of "automobile club" does not include persons, 2212 2213 associations, or corporations which are organized and operated

solely for the purpose of conducting, sponsoring, or sanctioning

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motor vehicle races, exhibitions, or contests upon racetracks, or upon racecourses established and marked as such for the duration of such particular events. The term words "motor vehicle" used herein has have the same meaning as defined in chapter 320.

- (2) An accidental death and dismemberment policy sold in combination with a policy providing only medical payments coverage, bodily injury liability coverage, personal injury protection and property damage liability coverage only policy.
- (3) Any product not regulated under the provisions of this insurance code.

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

Section 46. Subsection (1) of section 627.915, Florida Statutes, is amended to read:

627.915 Insurer experience reporting.-

(1) Each insurer transacting private passenger automobile insurance in this state shall report certain information annually to the office. The information will be due on or before July 1 of each year. The information must shall be divided into the following categories: bodily injury liability; property damage liability; uninsured motorist; personal injury protection benefits; medical payments; and comprehensive and collision. The information given must shall be on direct insurance writings in the state alone and shall represent total limits data. The

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information set forth in paragraphs (a)-(f) is applicable to voluntary private passenger and Joint Underwriting Association private passenger writings and must shall be reported for each of the latest 3 calendar-accident years, with an evaluation date of March 31 of the current year. The information set forth in paragraphs (g)-(j) is applicable to voluntary private passenger writings and must shall be reported on a calendar-accident year basis ultimately seven times at seven different stages of development.

- (a) Premiums earned for the latest 3 calendar-accident years.
- (b) Loss development factors and the historic development of those factors.
 - (c) Policyholder dividends incurred.
 - (d) Expenses for other acquisition and general expense.
- (e) Expenses for agents' commissions and taxes, licenses, and fees.
- (f) Profit and contingency factors as utilized in the insurer's automobile rate filings for the applicable years.
 - (g) Losses paid.
 - (h) Losses unpaid.
 - (i) Loss adjustment expenses paid.
 - (j) Loss adjustment expenses unpaid.
- 2267 Section 47. Subsections (2) and (3) of section 628.909, 2268 Florida Statutes, are amended to read:
 - 628.909 Applicability of other laws.-
 - (2) The following provisions of the Florida Insurance Code apply to captive insurance companies who are not industrial insured captive insurance companies to the extent that such



2273 provisions are not inconsistent with this part: (a) Chapter 624, except for ss. 624.407, 624.408, 624.4085, 2274 624.40851, 624.4095, 624.411, 624.425, and 624.426. 2275 2276 (b) Chapter 625, part II. 2277 (c) Chapter 626, part IX. 2278

- (d) Sections 627.730-627.7405, when no-fault coverage is provided.
 - (e) Chapter 628.

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- (3) The following provisions of the Florida Insurance Code shall apply to industrial insured captive insurance companies to the extent that such provisions are not inconsistent with this part:
- (a) Chapter 624, except for ss. 624.407, 624.408, 624.4085, 624.40851, 624.4095, 624.411, 624.425, 624.426, and 624.609(1).
- (b) Chapter 625, part II, if the industrial insured captive insurance company is incorporated in this state.
 - (c) Chapter 626, part IX.
- (d) Sections 627.730-627.7405 when no-fault coverage is provided.
- (e) Chapter 628, except for ss. 628.341, 628.351, and 628.6018.
- Section 48. Subsections (2), (6), and (7) of section 705.184, Florida Statutes, are amended to read:
- 705.184 Derelict or abandoned motor vehicles on the premises of public-use airports.-
- (2) The airport director or the director's designee shall contact the Department of Highway Safety and Motor Vehicles to notify that department that the airport has possession of the abandoned or derelict motor vehicle and to determine the name

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

(6) The airport pursuant to this section or, if used, a licensed independent wrecker company pursuant to s. 713.78 shall have a lien on an abandoned or derelict motor vehicle for all

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

- (7) (a) For the purpose of perfecting its lien under this section, the airport shall record a claim of lien which states shall state:
 - 1. The name and address of the airport.
- 2. The name of the owner of the motor vehicle, the insurance company insuring the motor vehicle, notwithstanding the provisions of s. 627.736, and all persons of record claiming a lien against the motor vehicle.
- 3. The costs incurred from reasonable towing, storage, and parking fees, if any.
- 4. A description of the motor vehicle sufficient for identification.
- (b) The claim of lien must shall be signed and sworn to or affirmed by the airport director or the director's designee.
 - (c) The claim of lien is shall be sufficient if it is in



2360	substantially the following form:
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2362	CLAIM OF LIEN
2363	State of
2364	County of
2365	Before me, the undersigned notary public, personally appeared
2366	, who was duly sworn and says that he/she is the
2367	of, whose address is; and that the
2368	following described motor vehicle:
2369	(Description of motor vehicle)
2370	owned by, whose address is, has accrued
2371	\$ in fees for a reasonable tow, for storage, and for
2372	parking, if applicable; that the lienor served its notice to the
2373	owner, the insurance company insuring the motor vehicle
2374	notwithstanding the provisions of s. 627.736, Florida Statutes,
2375	and all persons of record claiming a lien against the motor
2376	vehicle on,(year), by
2377	(Signature)
2378	Sworn to (or affirmed) and subscribed before me this day of
2379	,(year), by(name of person making statement)
2380	(Signature of Notary Public)(Print, Type, or Stamp
2381	Commissioned name of Notary Public)
2382	Personally KnownOR Producedas identification.
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2384	However, the negligent inclusion or omission of any information
2385	in this claim of lien which does not prejudice the owner does
2386	not constitute a default that operates to defeat an otherwise
2387	valid lien.
2388	(d) The claim of lien $\underline{\text{must}}$ $\underline{\text{shall}}$ be served on the owner of

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

(e) The claim of lien must shall be recorded with the clerk of court in the county where the airport is located. The recording of the claim of lien shall be constructive notice to all persons of the contents and effect of such claim. The lien attaches shall attach at the time of recordation and takes shall take priority as of that time.

Section 49. Subsection (4) of section 713.78, Florida Statutes, is amended to read:

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

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

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Motor Vehicle Title Information System or an equivalent commercially available system as being titled or registered.

- (b) If a Whenever any law enforcement agency authorizes the removal of a vehicle or vessel or if a whenever any towing service, garage, repair shop, or automotive service, storage, or parking place notifies the law enforcement agency of possession of a vehicle or vessel pursuant to s. 715.07(2)(a)2., the law enforcement agency of the jurisdiction where the vehicle or vessel is stored shall contact the Department of Highway Safety and Motor Vehicles, or the appropriate agency of the state of registration, if known, within 24 hours through the medium of electronic communications, giving the full description of the vehicle or vessel. Upon receipt of the full description of the vehicle or vessel, the department shall search its files to determine the owner's name, the insurance company insuring the vehicle or vessel, and whether any person has filed a lien upon the vehicle or vessel as provided in s. 319.27(2) and (3) and notify the applicable law enforcement agency within 72 hours. The person in charge of the towing service, garage, repair shop, or automotive service, storage, or parking place shall obtain such information from the applicable law enforcement agency within 5 days after the date of storage and shall give notice pursuant to paragraph (a). The department may release the insurance company information to the requestor notwithstanding the provisions of s. 627.736.
- (c) Notice by certified mail must shall be sent within 7 business days after the date of storage of the vehicle or vessel to the registered owner, the insurance company insuring the vehicle notwithstanding the provisions of s. 627.736, and all

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persons of record claiming a lien against the vehicle or vessel. The notice must It shall state the fact of possession of the vehicle or vessel, that a lien as provided in subsection (2) is claimed, that charges have accrued and the amount thereof, that the lien is subject to enforcement pursuant to law, and that the owner or lienholder, if any, has the right to a hearing as set forth in subsection (5), and that any vehicle or vessel which remains unclaimed, or for which the charges for recovery, towing, or storage services remain unpaid, may be sold free of all prior liens after 35 days if the vehicle or vessel is more than 3 years of age or after 50 days if the vehicle or vessel is 3 years of age or less.

- (d) If attempts to locate the name and address of the owner or lienholder prove unsuccessful, the towing-storage operator must shall, after 7 working days, excluding Saturday and Sunday, of the initial tow or storage, notify the public agency of jurisdiction where the vehicle or vessel is stored in writing by certified mail or acknowledged hand delivery that the towingstorage company has been unable to locate the name and address of the owner or lienholder and a physical search of the vehicle or vessel has disclosed no ownership information and a good faith effort has been made, including records checks of the Department of Highway Safety and Motor Vehicles database and the National Motor Vehicle Title Information System or an equivalent commercially available system. As used in For purposes of this paragraph and subsection (9), the term "good faith effort" means that the following checks have been performed by the company to establish prior state of registration and for title:
 - 1. Check of the Department of Highway Safety and Motor

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Vehicles database for the owner and any lienholder.

- 2. Check of the electronic National Motor Vehicle Title Information System or an equivalent commercially available system to determine the state of registration when there is not a current registration record for the vehicle on file with the Department of Highway Safety and Motor Vehicles.
- 3. Check of vehicle or vessel for any type of tag, tag record, temporary tag, or regular tag.
- 4. Check of law enforcement report for tag number or other information identifying the vehicle or vessel, if the vehicle or vessel was towed at the request of a law enforcement officer.
- 5. Check of trip sheet or tow ticket of tow truck operator to see if a tag was on vehicle or vessel at beginning of tow, if private tow.
- 6. If there is no address of the owner on the impound report, check of law enforcement report to see if an out-ofstate address is indicated from driver license information.
- 7. Check of vehicle or vessel for inspection sticker or other stickers and decals that may indicate a state of possible registration.
- 8. Check of the interior of the vehicle or vessel for any papers that may be in the glove box, trunk, or other areas for a state of registration.
 - 9. Check of vehicle for vehicle identification number.
 - 10. Check of vessel for vessel registration number.
- 11. Check of vessel hull for a hull identification number which should be carved, burned, stamped, embossed, or otherwise permanently affixed to the outboard side of the transom or, if there is no transom, to the outmost seaboard side at the end of

Statutes, are amended to read:

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the hull that bears the rudder or other steering mechanism. Section 50. Paragraph (a) of subsection (1), paragraph (c) of subsection (7), paragraphs (a), (b), and (c) of subsection (8), and subsections (9) and (10) of section 817.234, Florida

817.234 False and fraudulent insurance claims.-

- (1)(a) A person commits insurance fraud punishable as provided in subsection (11) if that person, with the intent to injure, defraud, or deceive any insurer:
- 1. Presents or causes to be presented any written or oral statement as part of, or in support of, a claim for payment or other benefit pursuant to an insurance policy or a health maintenance organization subscriber or provider contract, knowing that such statement contains any false, incomplete, or misleading information concerning any fact or thing material to such claim;
- 2. Prepares or makes any written or oral statement that is intended to be presented to an any insurer in connection with, or in support of, any claim for payment or other benefit pursuant to an insurance policy or a health maintenance organization subscriber or provider contract, knowing that such statement contains any false, incomplete, or misleading information concerning any fact or thing material to such claim;
- 3.a. Knowingly presents, causes to be presented, or prepares or makes with knowledge or belief that it will be presented to an any insurer, purported insurer, servicing corporation, insurance broker, or insurance agent, or any employee or agent thereof, any false, incomplete, or misleading information or a written or oral statement as part of, or in



support of, an application for the issuance of, or the rating of, any insurance policy, or a health maintenance organization subscriber or provider contract; or

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

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- (c) An insurer, or any person acting at the direction of or on behalf of an insurer, may not change an opinion in a mental or physical report prepared under s. 627.736(7) or direct the physician preparing the report to change such opinion; however, this provision does not preclude the insurer from calling to the attention of the physician errors of fact in the report based upon information in the claim file. Any person who violates this paragraph commits a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.
- (8) (a) It is unlawful for any person intending to defraud any other person to solicit or cause to be solicited any business from a person involved in a motor vehicle accident for the purpose of making, adjusting, or settling motor vehicle tort

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claims or claims for benefits under medical payments coverage in a motor vehicle insurance policy personal injury protection benefits required by s. 627.736. Any person who violates the provisions of this paragraph commits a felony of the second degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084. A person who is convicted of a violation of this subsection shall be sentenced to a minimum term of imprisonment of 2 years.

- (b) A person may not solicit or cause to be solicited any business from a person involved in a motor vehicle accident by any means of communication other than advertising directed to the public for the purpose of making motor vehicle tort claims or claims for benefits under medical payments coverage in a motor vehicle insurance policy personal injury protection benefits required by s. 627.736, within 60 days after the occurrence of the motor vehicle accident. Any person who violates this paragraph commits a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.
- (c) A lawyer, health care practitioner as defined in s. 456.001, or owner or medical director of a clinic required to be licensed pursuant to s. 400.9905 may not, at any time after 60 days have elapsed from the occurrence of a motor vehicle accident, solicit or cause to be solicited any business from a person involved in a motor vehicle accident by means of in person or telephone contact at the person's residence, for the purpose of making motor vehicle tort claims or claims for benefits under medical payments coverage in a motor vehicle insurance policy personal injury protection benefits required by s. 627.736. Any person who violates this paragraph commits a

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felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.

- (9) A person may not organize, plan, or knowingly participate in an intentional motor vehicle crash or a scheme to create documentation of a motor vehicle crash that did not occur for the purpose of making motor vehicle tort claims or claims for benefits under medical payments coverage in a motor vehicle insurance policy personal injury protection benefits as required by s. 627.736. Any person who violates this subsection commits a felony of the second degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084. A person who is convicted of a violation of this subsection shall be sentenced to a minimum term of imprisonment of 2 years.
- (10) A licensed health care practitioner who is found guilty of insurance fraud under this section for an act relating to a motor vehicle personal injury protection insurance policy loses his or her license to practice for 5 years and may not receive reimbursement under medical payments coverage in a motor vehicle insurance policy for personal injury protection benefits for 10 years.

Section 51. Applicability and construction; notice to policyholders.-

- (1) As used in this section, the term "minimum security requirements" means security that enables a person to respond in damages for liability on account of crashes arising out of the ownership, maintenance, or use of a motor vehicle in the amounts required by s. 324.021(7), Florida Statutes.
 - (2) Effective January 1, 2019:
 - (a) Motor vehicle insurance policies issued or renewed on



2621 or after that date may not include personal injury protection. 2622 (b) All persons subject to s. 324.022, s. 324.032, s. 627.7415, or s. 627.742, Florida Statutes, must maintain at 2623 2624 least minimum security requirements. 2625 (c) Any new or renewal motor vehicle insurance policy 2626 delivered or issued for delivery in this state must provide coverage that complies with minimum security requirements. 2627 2628 (d) Any new or renewal motor vehicle insurance policy 2629 furnished to an owner or operator of a motor vehicle as proof of 2630 financial responsibility pursuant to s. 324.022 or s. 324.031, 2631 Florida Statutes, must provide medical payments coverage that 2632 complies with s. 627.7265, Florida Statutes. 2633 (e) An existing motor vehicle insurance policy issued 2634 before that date which provides personal injury protection and 2635 property damage liability coverage that meets the requirements 2636 of s. 324.022, Florida Statutes, on December 31, 2018, but which 2637 does not meet minimum security requirements on or after January 2638 1, 2019, is deemed to meet the security requirements of s. 2639 324.022, Florida Statutes, and the medical payments coverage 2640 requirements of s. 627.7265, Florida Statutes, until such policy 2641 is renewed, nonrenewed, or canceled on or after January 1, 2019. 2642 (3) Each insurer shall allow each insured who has a new or 2643 renewal policy providing personal injury protection, which 2644 becomes effective before January 1, 2019, and whose policy does 2645 not meet minimum security requirements on or after January 1, 2019, to change coverages so as to eliminate personal injury 2646 2647 protection and obtain coverage providing minimum security 2648 requirements, which shall be effective on or after January 1,

2019. The insurer is not required to provide coverage complying

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with minimum security requirements in such policies if the insured does not pay the required premium, if any, by January 1, 2019, or such later date as the insurer may allow. Any reduction in the premium must be refunded by the insurer. The insurer may not impose on the insured an additional fee or charge that applies solely to a change in coverage; however, the insurer may charge an additional required premium that is actuarially indicated.

- (4) By September 1, 2018, each motor vehicle insurer shall provide notice of this section to each motor vehicle policyholder who is subject to this section. The notice is subject to approval by the Office of Insurance Regulation and must clearly inform the policyholder that:
- (a) The Florida Motor Vehicle No-Fault Law is repealed, effective January 1, 2019, and that on or after that date, the insured is no longer required to maintain personal injury protection insurance coverage, that personal injury protection coverage is no longer available for purchase in this state, and that all new or renewal policies issued on or after that date do not contain such coverage.
- (b) Effective January 1, 2019, a person subject to the financial responsibility requirements of s. 324.022, Florida Statutes, must maintain minimum security requirements that enable the person to respond in damages for liability on account of accidents arising out of the use of a motor vehicle in the following amounts:
- 1. Beginning January 1, 2019, and continuing through December 31, 2020:
 - a. Twenty thousand dollars for bodily injury to, or the

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2679 death of, one person in any one crash and, subject to such limits for one person, in the amount of \$40,000 for bodily 2680 injury to, or the death of, two or more persons in any one 2681 2682 crash; and

- b. Ten thousand dollars for damage to, or destruction of, the property of others in any one crash.
 - 2. Beginning January 1, 2021, and thereafter:
- a. Twenty-five thousand dollars for bodily injury to, or the death of, one person in any one crash and, subject to such limits for one person, in the amount of \$50,000 for bodily injury to, or the death of, two or more persons in any one crash; and
- b. Ten thousand dollars for damage to, or destruction of, the property of others in any one crash.
- (c) Personal injury protection insurance paid covered medical expenses for injuries sustained in a motor vehicle crash by the policyholder, passengers, and relatives residing in the policyholder's household.
- (d) Bodily injury liability coverage protects the insured, up to the coverage limits, against loss if the insured is legally responsible for the death of or bodily injury to others in a motor vehicle accident.
- (e) Effective January 1, 2019, a person who purchases a motor vehicle liability insurance policy as proof of financial responsibility must maintain medical payments coverage that complies with s. 627.7265, Florida Statutes. Medical payments coverage pays covered medical expenses, up to the limits of such coverage, for injuries sustained in a motor vehicle crash by the policyholder, passengers, and relatives residing in the

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policyholder's household, as provided in s. 627.7265, Florida Statutes. Medical payments coverage also provides a death benefit of at least \$5,000. Medical payments coverage provides reimbursement for the following if medically necessary and if an individual initially receives such treatment within 14 days after the motor vehicle accident:

- 1. Emergency transportation and treatment.
- 2. Emergency services and care provided by a hospital.
- 3. Emergency services and care provided by a licensed physician or licensed dentist in a hospital, ambulatory surgical center, or mobile surgical facility licensed under chapter 395, Florida Statutes, and related hospital inpatient care.
- 4. Hospital inpatient services, other than emergency services and care.
- 5. Hospital outpatient services, other than emergency services and care.
- 6. Physician services and care provided by a physician licensed under chapter 458 or chapter 459 or a chiropractic physician licensed under chapter 460; dental services and care provided by a dentist licensed under chapter 466; or, to the extent permitted by applicable law and under the supervision of such physician, osteopathic physician, chiropractic physician, or dentist, services and care provided by a physician assistant licensed under chapter 458 or chapter 459 or by an advanced registered nurse practitioner licensed under chapter 464.
- (f) The policyholder may obtain underinsured motorist coverage, which provides benefits, up to the limits of such coverage, to a policyholder or other insured entitled to recover damages for bodily injury, sickness, disease, or death resulting

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from a motor vehicle accident with an uninsured or underinsured owner or operator of a motor vehicle.

- (g) If the policyholder's new or renewal motor vehicle insurance policy is effective before January 1, 2019, and contains personal injury protection and property damage liability coverage as required by state law before January 1, 2019, but does not meet minimum security requirements on or after January 1, 2019, the policy is deemed to meet minimum security requirements until it is renewed, nonrenewed, or canceled on or after January 1, 2019.
- (h) A policyholder whose new or renewal policy becomes effective before January 1, 2019, but does not meet minimum security requirements on or after January 1, 2019, may change coverages under the policy so as to eliminate personal injury protection and to obtain coverage providing minimum security requirements, including bodily injury liability coverage, which are effective on or after January 1, 2019.
- (i) If the policyholder has any questions, he or she should contact the person named at the telephone number provided in the notice.
- (5) This section takes effect upon this act becoming a law. Section 52. Application of suspensions for failure to maintain security; reinstatement.—All suspensions for failure to maintain required security as required by law in effect before January 1, 2019, remain in full force and effect after January 1, 2019. A driver may reinstate a suspended driver license or registration as provided under s. 324.0221, Florida Statutes.
- Section 53. For the 2018-2019 fiscal year, the sum of \$83,651 in nonrecurring funds is appropriated from the Insurance



Regulatory Trust Fund to the Office of Insurance Regulation for the purpose of implementing this act.

Section 54. Except as otherwise expressly provided in this act and except for this section, which shall take effect upon this act becoming a law, this act shall take effect January 1, 2019.

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======= T I T L E A M E N D M E N T ======= 2773 And the title is amended as follows: 2.774

Delete everything before the enacting clause and insert:

A bill to be entitled

An act relating to motor vehicle insurance; repealing ss. 627.730, 627.731, 627.7311, 627.732, 627.733, 627.734, 627.736, 627.737, 627.739, 627.7401, 627.7403, and 627.7405, F.S., which comprise the Florida Motor Vehicle No-Fault Law; repealing s. 627.7407, F.S., relating to application of the Florida Motor Vehicle No-Fault Law; amending s. 316.646, F.S.; revising a requirement for proof of security on a motor vehicle and the applicability of the requirement; amending s. 318.18, F.S.; conforming a provision to changes made by the act; amending s. 320.02, F.S.; revising the motor vehicle insurance coverages that an applicant must show to register certain vehicles with the Department of Highway Safety and Motor Vehicles; deleting a requirement that specified information be included on a certain insurance proof-of-purchase card; revising

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construction; amending s. 320.0609, F.S.; conforming a provision to changes made by the act; amending s. 320.27, F.S.; defining the term "garage liability insurance"; revising garage liability insurance requirements for motor vehicle dealer applicants; conforming a provision to changes made by the act; amending s. 320.771, F.S.; revising garage liability insurance requirements for recreational vehicle dealer license applicants; amending ss. 322.251 and 322.34, F.S.; conforming provisions to changes made by the act; amending s. 324.011, F.S.; revising legislative intent; amending s. 324.021, F.S.; revising definitions of the terms "motor vehicle" and "proof of financial responsibility"; revising, at specified timeframes, minimum coverage requirements for proof of financial responsibility for specified motor vehicles; defining the term "for-hire passenger transportation vehicle"; conforming provisions to changes made by the act; amending s. 324.022, F.S.; revising, at specified timeframes, minimum liability coverage requirements for motor vehicle owners or operators; revising authorized methods for meeting such requirements; revising the vehicles that are excluded from the definition of the term "motor vehicle" and providing security requirements for certain excluded vehicles; conforming provisions to changes made by the act; conforming cross-references; amending s. 324.0221, F.S.; revising applicability of certain insurer reporting and notice requirements as to policies

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providing certain coverages; conforming provisions to changes made by the act; amending s. 324.023, F.S.; conforming cross-references; amending s. 324.031, F.S.; revising applicability of a provision authorizing certain methods of proving financial responsibility; revising, at specified timeframes, the amount of a certificate of deposit required for a specified method of proof of financial responsibility; revising excess liability coverage requirements for a person electing to use such method; amending s. 324.032, F.S.; revising financial responsibility requirements for owners or lessees of for-hire passenger transportation vehicles and the applicability of such requirements; revising a requirement for a motor vehicle liability policy obtained to comply with such requirements; amending ss. 324.051, 324.071, 324.091, and 324.151, F.S.; making technical changes; amending s. 324.161, F.S.; revising requirements for a certificate of deposit that is required if a person elects a certain method of providing financial responsibility; amending s. 324.171, F.S.; revising, at specified timeframes, the minimum net worth requirements to qualify certain persons as self-insurers; conforming provisions to changes made by the act; amending s. 324.251, F.S.; revising the short title and an effective date; amending s. 400.9905, F.S.; revising the definition of the term "clinic"; amending ss. 400.991 and 400.9935, F.S.; conforming provisions to changes made by the

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act; amending s. 409.901, F.S.; revising the definition of the term "third-party benefit"; amending s. 409.910, F.S.; revising the definition of the term "medical coverage"; making technical changes; amending s. 456.057, F.S.; conforming a cross-reference; amending s. 456.072, F.S.; revising specified grounds for discipline for certain health professions; amending s. 626.9541, F.S.; conforming a provision to changes made by the act; revising the type of insurance coverage applicable to a certain prohibited act; conforming a cross-reference; amending s. 626.989, F.S.; revising the definition of the term "fraudulent insurance act"; amending s. 627.06501, F.S.; revising coverages that may provide for a reduction in motor vehicle insurance policy premium charges under certain circumstances; amending s. 627.0652, F.S.; revising coverages that must provide a premium charge reduction under certain circumstances; amending s. 627.0653, F.S.; revising coverages subject to premium discounts for specified motor vehicle equipment; amending s. 627.4132, F.S.; revising the coverages of a motor vehicle policy which are subject to a stacking prohibition; amending s. 627.7263, F.S.; revising provisions relating to designation of primary coverages for rental and leasing driver's insurance; conforming provisions to changes made by the act; creating s. 627.7265, F.S.; requiring specified motor vehicle liability insurance policies to include medical payments coverage; specifying persons such

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coverage must protect; specifying the minimum medical expense coverage and minimum death benefit required under such coverage; providing construction relating to limits on certain other coverages; prohibiting insurers from offering such coverage to an applicant or policyholder with a deductible; specifying medical services and care required to be covered under such coverage; authorizing insurers to exclude medical payment benefits under certain circumstances; providing that medical payments benefits are primary to certain health insurance benefits and apply to the coinsurance or deductible amounts required by certain health insurance policies, except under certain circumstances; providing that a medical payments insurance policy, under certain circumstances, may include a subrogation provision for medical payments benefits paid; requiring insurers, upon receiving a certain notice, to hold a specified reserve for certain purposes for a specified time; providing that the reserve requirement does not require insurers to establish a claim reserve for accounting purposes; specifying requirements, procedures, limitations, and prohibitions relating to charges and billing for care of bodily injuries under medical payments coverage; defining the term "service year"; requiring the Department of Health to adopt a certain rule; providing insurers a civil cause of action against certain persons who are convicted of or plead quilty or nolo contendre to certain acts of insurance fraud

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associated with claims for medical payments coverage benefits; requiring insurers receiving notice of a claim to provide a specified fraud advisory notice to certain persons; providing that claims generated as a result of certain patient brokering activities are nonreimbursable; authorizing notices, documentation, transmissions, or communications to be transferred electronically in a secure manner; amending s. 627.727, F.S.; conforming provisions to changes made by the act; amending s. 627.7275, F.S.; revising applicability and required coverages for a motor vehicle insurance policy; conforming provisions to changes made by the act; amending s. 627.728, F.S.; conforming a provision to changes made by the act; amending s. 627.7295, F.S.; revising the definitions of the terms "policy" and "binder"; revising the coverages of a motor vehicle insurance policy for which a licensed general lines agent may charge a specified fee; revising applicability; conforming a cross-reference; amending s. 627.7415, F.S.; revising, at specified intervals, the minimum levels of certain liability insurance required for commercial motor vehicles; amending s. 627.8405, F.S.; revising coverages in a policy sold in combination with an accidental death and dismemberment policy, which a premium finance company may not finance; revising rulemaking authority of the commission; amending ss. 627.915, 628.909, 705.184, and 713.78, F.S.; conforming provisions to changes made by the act;

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amending s. 817.234, F.S.; revising coverages that are the basis of specified prohibited false and fraudulent insurance claims; conforming a provision to changes made by the act; conforming a cross-reference; providing applicability and construction relating to changes made by the act; defining the term "minimum security requirements"; providing requirements and procedures relating to motor vehicle insurance policies that include personal injury protection as of a specified date; requiring an insurer to provide, by a specified date, a specified notice to policyholders relating to requirements under the act; providing for construction relating to suspensions for failure to maintain required security in effect before a specified date; providing an appropriation; providing effective dates.

	LEGISLATIVE ACTION	
Senate		House
Comm: FAV		
02/28/2018		
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Appropriations Subcommittee on Health and Human Services (Rouson) recommended the following:

Senate Amendment to Amendment (244072)

Delete line 1642

and insert:

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limit of at least \$15,000 per person for medical expense

incurred

	LEGISLATIVE ACTION	
Senate		House
Comm: UNFAV		
02/28/2018		
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Appropriations Subcommittee on Health and Human Services (Passidomo) recommended the following:

Senate Substitute for Amendment (244072) (with title amendment)

Delete everything after the enacting clause and insert:

Section 1. Sections 627.730, 627.731, 627.7311, 627.732, 627.733, 627.734, 627.736, 627.737, 627.739, 627.7401, 627.7403, and 627.7405, Florida Statutes, which comprise the Florida Motor Vehicle No-Fault Law, are repealed.

Section 2. Section 627.7407, Florida Statutes, is repealed.

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Section 3. Subsection (1) of section 316.646, Florida Statutes, is amended to read:

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

- (1) Any person required by s. 324.022 to maintain liability security for property damage, liability security, required by s. 324.023 to maintain liability security for bodily injury, or death, or required by s. 627.733 to maintain personal injury protection security on a motor vehicle shall have in his or her immediate possession at all times while operating such motor vehicle proper proof of maintenance of the required security required under s. 324.021(7).
- (a) Such proof must shall be in a uniform paper or electronic format, as prescribed by the department, a valid insurance policy, an insurance policy binder, a certificate of insurance, or such other proof as may be prescribed by the department.
- (b) 1. The act of presenting to a law enforcement officer an electronic device displaying proof of insurance in an electronic format does not constitute consent for the officer to access any information on the device other than the displayed proof of insurance.
- 2. The person who presents the device to the officer assumes the liability for any resulting damage to the device.
- Section 4. Paragraph (b) of subsection (2) of section 318.18, Florida Statutes, is amended to read:
- 318.18 Amount of penalties. The penalties required for a noncriminal disposition pursuant to s. 318.14 or a criminal offense listed in s. 318.17 are as follows:

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- (2) Thirty dollars for all nonmoving traffic violations and:
 - (b) For all violations of ss. 320.0605, 320.07(1), 322.065, and 322.15(1). A Any person who is cited for a violation of s. 320.07(1) shall be charged a delinquent fee pursuant to s. 320.07(4).
 - 1. If a person who is cited for a violation of s. 320.0605 or s. 320.07 can show proof of having a valid registration at the time of arrest, the clerk of the court may dismiss the case and may assess a dismissal fee of up to \$10. A person who finds it impossible or impractical to obtain a valid registration certificate must submit an affidavit detailing the reasons for the impossibility or impracticality. The reasons may include, but are not limited to, the fact that the vehicle was sold, stolen, or destroyed; that the state in which the vehicle is registered does not issue a certificate of registration; or that the vehicle is owned by another person.
 - 2. If a person who is cited for a violation of s. 322.03, s. 322.065, or s. 322.15 can show a driver license issued to him or her and valid at the time of arrest, the clerk of the court may dismiss the case and may assess a dismissal fee of up to \$10.
 - 3. If a person who is cited for a violation of s. 316.646 can show proof of security as required by s. 324.021(7) s. 627.733, issued to the person and valid at the time of arrest, the clerk of the court may dismiss the case and may assess a dismissal fee of up to \$10. A person who finds it impossible or impractical to obtain proof of security must submit an affidavit detailing the reasons for the impracticality. The reasons may

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include, but are not limited to, the fact that the vehicle has since been sold, stolen, or destroyed; that the owner or registrant of the vehicle is not required by s. 627.733 to maintain personal injury protection insurance; or that the vehicle is owned by another person.

Section 5. Paragraphs (a) and (d) of subsection (5) of section 320.02, Florida Statutes, are amended to read:

320.02 Registration required; application for registration; forms.-

(5) (a) Proof that bodily injury liability coverage and property damage liability coverage personal injury protection benefits have been purchased if required under s. 324.022, s. 324.032, or s. 627.742 s. 627.733, that property damage liability coverage has been purchased as required under s. 324.022, that bodily injury liability or death coverage has been purchased if required under s. 324.023, and that combined bodily liability insurance and property damage liability insurance have been purchased if required under s. 627.7415 must shall be provided in the manner prescribed by law by the applicant at the time of application for registration of any motor vehicle that is subject to such requirements. The issuing agent may not shall refuse to issue registration if such proof of purchase is not provided. Insurers shall furnish uniform proof-of-purchase cards in a paper or electronic format in a form prescribed by the department and include the name of the insured's insurance company, the coverage identification number, and the make, year, and vehicle identification number of the vehicle insured. The card must contain a statement notifying the applicant of the penalty specified under s. 316.646(4). The card or insurance



98 policy, insurance policy binder, or certificate of insurance or 99 a photocopy of any of these; an affidavit containing the name of 100 the insured's insurance company, the insured's policy number, 101 and the make and year of the vehicle insured; or such other 102 proof as may be prescribed by the department constitutes shall 103 constitute sufficient proof of purchase. If an affidavit is provided as proof, it must be in substantially the following 104 105 form: 106 107 Under penalty of perjury, I ... (Name of insured) ... do hereby 108 certify that I have ... (bodily injury liability and Personal 109 Injury Protection, property damage liability coverage, and, if 110 required, Bodily Injury Liability) ... Insurance currently in 111 effect with ... (Name of insurance company) ... under ... (policy 112 number) ... covering ... (make, year, and vehicle identification 113 number of vehicle) (Signature of Insured) ... 114 115 Such affidavit must include the following warning: 116 117 WARNING: GIVING FALSE INFORMATION IN ORDER TO OBTAIN A VEHICLE 118 REGISTRATION CERTIFICATE IS A CRIMINAL OFFENSE UNDER FLORIDA LAW. ANYONE GIVING FALSE INFORMATION ON THIS AFFIDAVIT IS 119 120 SUBJECT TO PROSECUTION. 121 122 If an application is made through a licensed motor vehicle 123 dealer as required under s. 319.23, the original or a photocopy 124 photostatic copy of such card, insurance policy, insurance 125 policy binder, or certificate of insurance or the original

affidavit from the insured must shall be forwarded by the dealer

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to the tax collector of the county or the Department of Highway Safety and Motor Vehicles for processing. By executing the aforesaid affidavit, a no licensed motor vehicle dealer is not will be liable in damages for any inadequacy, insufficiency, or falsification of any statement contained therein. A card must also indicate the existence of any bodily injury liability insurance voluntarily purchased.

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

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Section 6. Paragraph (b) of subsection (1) of section

320.0609, Florida Statutes, is amended to read:



320.0609 Transfer and exchange of registration license plates; transfer fee.-

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

Section 7. Paragraph (g) is added to subsection (1) of section 320.27, Florida Statutes, and subsection (3) of that section is amended, to read:

320.27 Motor vehicle dealers.-

- (1) DEFINITIONS.—The following words, terms, and phrases when used in this section have the meanings respectively ascribed to them in this subsection, except where the context clearly indicates a different meaning:
- (g) "Garage liability insurance" means combined singlelimit liability coverage, including property damage and bodily injury liability coverage, in the amount of:
- 1. Beginning January 1, 2019, and continuing through December 31, 2020, at least \$50,000.
- 2. Beginning January 1, 2021, and continuing through December 31, 2022, at least \$60,000.
- 3. Beginning January 1, 2023 and thereafter, at least \$70,000.
- (3) APPLICATION AND FEE.—The application for the license application must shall be in such form as may be prescribed by the department and is shall be subject to such rules with respect thereto as may be so prescribed by the department it.

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Such application must shall be verified by oath or affirmation and must shall contain a full statement of the name and birth date of the person or persons applying for the license therefor; the name of the firm or copartnership, with the names and places of residence of all members thereof, if such applicant is a firm or copartnership; the names and places of residence of the principal officers, if the applicant is a body corporate or other artificial body; the name of the state under whose laws the corporation is organized; the present and former place or places of residence of the applicant; and the prior business in which the applicant has been engaged and its the location thereof. The Such application must shall describe the exact location of the place of business and must shall state whether the place of business is owned by the applicant and when acquired, or, if leased, a true copy of the lease must shall be attached to the application. The applicant shall certify that the location provides an adequately equipped office and is not a residence; that the location affords sufficient unoccupied space upon and within which adequately to store all motor vehicles offered and displayed for sale; and that the location is a suitable place where the applicant can in good faith carry on such business and keep and maintain books, records, and files necessary to conduct such business, which must shall be available at all reasonable hours to inspection by the department or any of its inspectors or other employees. The applicant shall certify that the business of a motor vehicle dealer is the principal business that will which shall be conducted at that location. The application must shall contain a statement that the applicant is either franchised by a

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manufacturer of motor vehicles, in which case the name of each motor vehicle that the applicant is franchised to sell must shall be included, or an independent (nonfranchised) motor vehicle dealer. The application must shall contain other relevant information as may be required by the department. The applicant must furnish, including evidence, in a form approved by the department, that the applicant is insured under a garage liability insurance policy or a general liability insurance policy coupled with a business automobile policy having the garage liability insurance coverage required by this subsection, which shall include, at a minimum, \$25,000 combined single-limit liability coverage including bodily injury and property damage protection and \$10,000 personal injury protection. However, a salvage motor vehicle dealer as defined in subparagraph (1)(c)5. is exempt from the requirements for garage liability insurance and personal injury protection insurance on those vehicles that cannot be legally operated on roads, highways, or streets in this state. Franchise dealers must submit a garage liability insurance policy, and all other dealers must submit a garage liability insurance policy or a general liability insurance policy coupled with a business automobile policy. Such policy must shall be for the license period, and evidence of a new or continued policy must shall be delivered to the department at the beginning of each license period. Upon making an initial application, the applicant shall pay to the department a fee of \$300 in addition to any other fees required by law. Applicants may choose to extend the licensure period for 1 additional year for a total of 2 years. An initial applicant shall pay to the department a fee of \$300 for the first year and \$75 for the

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second year, in addition to any other fees required by law. An applicant for renewal shall pay to the department \$75 for a 1year renewal or \$150 for a 2-year renewal, in addition to any other fees required by law. Upon making an application for a change of location, the applicant person shall pay a fee of \$50 in addition to any other fees now required by law. The department shall, in the case of every application for initial licensure, verify whether certain facts set forth in the application are true. Each applicant, general partner in the case of a partnership, or corporate officer and director in the case of a corporate applicant shall, must file a set of fingerprints with the department for the purpose of determining any prior criminal record or any outstanding warrants. The department shall submit the fingerprints to the Department of Law Enforcement for state processing and forwarding to the Federal Bureau of Investigation for federal processing. The actual cost of state and federal processing must shall be borne by the applicant and is in addition to the fee for licensure. The department may issue a license to an applicant pending the results of the fingerprint investigation, which license is fully revocable if the department subsequently determines that any facts set forth in the application are not true or correctly represented.

Section 8. Paragraph (j) of subsection (3) of section 320.771, Florida Statutes, is amended to read:

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



verified by oath or affirmation and shall contain:

(j) A statement that the applicant is insured under a garage liability insurance policy in accordance with s. 320.27(1)(q), which shall include, at a minimum, \$25,000 combined single-limit liability coverage, including bodily injury and property damage protection, and \$10,000 personal injury protection, if the applicant is to be licensed as a dealer in, or intends to sell, recreational vehicles.

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

Section 9. Subsections (1) and (2) of section 322.251, Florida Statutes, are amended to read:

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

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

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of the cancellation, suspension, revocation, or disqualification of the licensee's driving privilege.

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

Section 10. Paragraph (a) of subsection (8) of section 322.34, Florida Statutes, is amended to read:

- 322.34 Driving while license suspended, revoked, canceled, or disqualified.-
- (8)(a) Upon the arrest of a person for the offense of driving while the person's driver license or driving privilege is suspended or revoked, the arresting officer shall determine:
- 1. Whether the person's driver license is suspended or revoked.
- 2. Whether the person's driver license has remained suspended or revoked since a conviction for the offense of driving with a suspended or revoked license.
- 3. Whether the suspension or revocation was made under s. 316.646 or s. 627.733, relating to failure to maintain required security, or under s. 322.264, relating to habitual traffic offenders.

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

Section 11. Section 324.011, Florida Statutes, is amended to read:

324.011 Legislative intent and purpose of chapter.—It is the Legislature's intent of this chapter to ensure that the privilege of owning or operating a motor vehicle in this state be exercised recognize the existing privilege to own or operate a motor vehicle on the public streets and highways of this state when such vehicles are used with due consideration for others' safety others and their property, and to promote safety, and to provide financial security requirements for such owners and or operators whose responsibility it is to recompense others for injury to person or property caused by the operation of a motor vehicle. Therefore, this chapter requires that every owner or operator of a motor vehicle required to be registered in this state establish, maintain, and it is required herein that the operator of a motor vehicle involved in a crash or convicted of certain traffic offenses meeting the operative provisions of s. 324.051(2) shall respond for such damages and show proof of financial ability to respond for damages arising out of the ownership, maintenance, or use of a motor vehicle in future accidents as a requisite to owning or operating a motor vehicle in this state his or her future exercise of such privileges.

Section 12. Subsections (1) and (7) and paragraph (c) of subsection (9) of section 324.021, Florida Statutes, are amended, and subsection (12) is added to that section, to read:

324.021 Definitions; minimum insurance required.—The following words and phrases when used in this chapter shall, for

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the purpose of this chapter, have the meanings respectively ascribed to them in this section, except in those instances where the context clearly indicates a different meaning:

- (1) MOTOR VEHICLE.—Every self-propelled vehicle that is designed and required to be licensed for use upon a highway, including trailers and semitrailers designed for use with such vehicles, except traction engines, road rollers, farm tractors, power shovels, and well drillers, and every vehicle that is propelled by electric power obtained from overhead wires but not operated upon rails, but not including any personal delivery device as defined in s. 316.003, bicycle, or moped. However, the term "motor vehicle" does not include a motor vehicle as defined in s. 627.732(3) when the owner of such vehicle has complied with the requirements of ss. 627.730-627.7405, inclusive, unless the provisions of s. 324.051 apply; and, in such case, the applicable proof of insurance provisions of s. 320.02 apply.
- (7) PROOF OF FINANCIAL RESPONSIBILITY.—That Proof of ability to respond in damages for liability on account of crashes arising out of the ownership, maintenance, or use of a motor vehicle:
- (a) With respect to a motor vehicle that is not a commercial motor vehicle, nonpublic sector bus, or for-hire passenger transportation vehicle:
- 1. Beginning January 1, 2019, and continuing through December 31, 2020, in the amount of:
- a. Twenty thousand dollars for \$10,000 because of bodily injury to, or the death of, one person in any one crash and, +
- (b) subject to such limits for one person, in the amount of \$40,000 for \$20,000 because of bodily injury to, or the death



388 of, two or more persons in any one crash; and 389 b. Ten thousand dollars for damage to, or destruction of, 390 property of others in any one crash. 2. Beginning January 1, 2021, and continuing through 391 392 December 31, 2022, in the amount of: 393 a. Twenty-five thousand dollars for bodily injury to, or 394 the death of, one person in any one crash and, subject to such 395 limits for one person, in the amount of \$50,000 for bodily 396 injury to, or the death of, two or more persons in any one 397 crash; and 398 b. Ten thousand dollars for damage to, or destruction of, 399 property of others in any one crash. 3. Beginning January 1, 2023, and continuing thereafter, in 400 401 the amount of: 402 a. Thirty thousand dollars for bodily injury to, or the death of, one person in any one crash and, subject to such 403 404 limits for one person, in the amount of \$60,000 for bodily 405 injury to, or the death of, two or more persons in any one 406 crash; and 407 b.(c) Ten thousand dollars for damage In the amount of \$10,000 because of injury to, or destruction of, property of 408 409 others in any one crash.; and 410 (b) (d) With respect to commercial motor vehicles and 411 nonpublic sector buses, in the amounts specified in s. 627.7415 412 ss. 627.7415 and 627.742, respectively. 413 (c) With respect to nonpublic sector buses, in the amounts 414 specified in s. 627.742. 415 (d) With respect to for-hire passenger transportation

vehicles, in the amounts specified in s. 324.032.

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- 417 (9) OWNER; OWNER/LESSOR.-
 - (c) Application.—

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- 1. The limits on liability in subparagraphs (b) 2. and 3. do not apply to an owner of motor vehicles that are used for commercial activity in the owner's ordinary course of business, other than a rental company that rents or leases motor vehicles. For purposes of this paragraph, the term "rental company" includes only an entity that is engaged in the business of renting or leasing motor vehicles to the general public and that rents or leases a majority of its motor vehicles to persons with no direct or indirect affiliation with the rental company. The term also includes a motor vehicle dealer that provides temporary replacement vehicles to its customers for up to 10 days. The term "rental company" also includes:
- a. A related rental or leasing company that is a subsidiary of the same parent company as that of the renting or leasing company that rented or leased the vehicle.
- b. The holder of a motor vehicle title or an equity interest in a motor vehicle title if the title or equity interest is held pursuant to or to facilitate an asset-backed securitization of a fleet of motor vehicles used solely in the business of renting or leasing motor vehicles to the general public and under the dominion and control of a rental company, as described in this subparagraph, in the operation of such rental company's business.
- 2. Furthermore, with respect to commercial motor vehicles as defined in s. 207.002 or s. 320.01 $\frac{1}{8}$ 627.732, the limits on liability in subparagraphs (b) 2. and 3. do not apply if, at the time of the incident, the commercial motor vehicle is being used

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in the transportation of materials found to be hazardous for the purposes of the Hazardous Materials Transportation Authorization Act of 1994, as amended, 49 U.S.C. ss. 5101 et seq., and that is required pursuant to such act to carry placards warning others of the hazardous cargo, unless at the time of lease or rental either:

- a. The lessee indicates in writing that the vehicle will not be used to transport materials found to be hazardous for the purposes of the Hazardous Materials Transportation Authorization Act of 1994, as amended, 49 U.S.C. ss. 5101 et seq.; or
- b. The lessee or other operator of the commercial motor vehicle has in effect insurance with limits of at least \$5 million \$5,000,000 combined property damage and bodily injury liability.
- (12) FOR-HIRE PASSENGER TRANSPORTATION VEHICLE.—Every "forhire vehicle" as defined in s. 320.01(15) which is offered or used to provide transportation for persons, including taxicabs, limousines, and jitneys.

Section 13. Section 324.022, Florida Statutes, is amended to read:

- 324.022 Financial responsibility requirements for property damage.-
- (1) (a) Every owner or operator of a motor vehicle required to be registered in this state shall establish and continuously maintain the ability to respond in damages for liability on account of accidents arising out of the use of the motor vehicle in the amount of:
- 1. Beginning January 1, 2019, and continuing through December 31, 2020:

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- 475 a. Twenty thousand dollars for bodily injury to, or the 476 death of, one person in any one crash and, subject to such limits for one person, in the amount of \$40,000 for bodily 477 injury to, or the death of, two or more persons in any one 479 crash; and
 - b. Ten thousand dollars for damage to, or destruction of, property of others in any one crash.
 - 2. Beginning January 1, 2021, and continuing through December 31, 2022:
 - a. Twenty-five thousand dollars for bodily injury to, or the death of, one person in any one crash and, subject to such limits for one person, in the amount of \$50,000 for bodily injury to, or the death of, two or more persons in any one crash; and
 - b. Ten thousand dollars for damage to, or destruction of, property of others in any one crash.
 - 3. Beginning January 1, 2023, and continuing thereafter:
 - a. Thirty thousand dollars for bodily injury to, or the death of, one person in any one crash and, subject to such limits for one person, in the amount of \$60,000 for bodily injury to, or the death of, two or more persons in any one crash; and
 - b. Ten thousand dollars for \$10,000 because of damage to, or destruction of, property of others in any one crash.
 - (b) The requirements of paragraph (a) this section may be met by one of the methods established in s. 324.031; by selfinsuring as authorized by s. 768.28(16); or by maintaining a motor vehicle liability insurance policy that an insurance policy providing coverage for property damage liability in the

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amount of at least \$10,000 because of damage to, or destruction of, property of others in any one accident arising out of the use of the motor vehicle. The requirements of this section may also be met by having a policy which provides combined property damage liability and bodily injury liability coverage for any one crash arising out of the ownership, maintenance, or use of a motor vehicle which conforms to the requirements of s. 324.151 in the amount of:

- 1. At least \$50,000 for every owner or operator subject to the financial responsibility required in subparagraph (1)(a)1.
- 2. At least \$60,000 for every owner or operator subject to the financial responsibility required in subparagraph (1)(a)2.
- 3. At least \$70,000 for every owner or operator subject to the financial responsibility required in subparagraph (1)(a)3. \$30,000 for combined property damage liability and bodily injury liability for any one crash arising out of the use of the motor vehicle. The policy, with respect to coverage for property damage liability, must meet the applicable requirements of s. 324.151, subject to the usual policy exclusions that have been approved in policy forms by the Office of Insurance Regulation. No insurer shall have any duty to defend uncovered claims irrespective of their joinder with covered claims.
 - (2) As used in this section, the term:
- (a) "Motor vehicle" means any self-propelled vehicle that has four or more wheels and that is of a type designed and required to be licensed for use on the highways of this state, and any trailer or semitrailer designed for use with such vehicle. The term does not include the following:
 - 1. A mobile home as defined in s. 320.01.

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- 2. A motor vehicle that is used in mass transit and designed to transport more than five passengers, exclusive of the operator of the motor vehicle, and that is owned by a municipality, transit authority, or political subdivision of the state.
- 3. A school bus as defined in s. 1006.25, which shall maintain security as required under s. 316.615.
- 4. A commercial motor vehicle as defined in s. 207.002 or s. 320.01, which shall maintain security as required under ss. 324.031 and 627.7415.
- 5. A nonpublic sector bus, which shall maintain security as required under ss. 324.031 and 627.742.
- 6.4. A vehicle providing for-hire passenger transportation vehicle, which that is subject to the provisions of s. 324.031. A taxicab shall maintain security as required under s. 324.032 s. 324.032(1).
 - 7.5. A personal delivery device as defined in s. 316.003.
- (b) "Owner" means the person who holds legal title to a motor vehicle or the debtor or lessee who has the right to possession of a motor vehicle that is the subject of a security agreement or lease with an option to purchase.
- (3) Each nonresident owner or registrant of a motor vehicle that, whether operated or not, has been physically present within this state for more than 90 days during the preceding 365 days shall maintain security as required by subsection (1). The security must be that is in effect continuously throughout the period the motor vehicle remains within this state.
- (4) An The owner or registrant of a motor vehicle who is exempt from the requirements of this section if she or he is a

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member of the United States Armed Forces and is called to or on active duty outside the United States in an emergency situation is exempt from this section while he or she. The exemption provided by this subsection applies only as long as the member of the Armed Forces is on such active duty. This exemption outside the United States and applies only while the vehicle covered by the security is not operated by any person. Upon receipt of a written request by the insured to whom the exemption provided in this subsection applies, the insurer shall cancel the coverages and return any unearned premium or suspend the security required by this section. Notwithstanding s. 324.0221(2) s. 324.0221(3), the department may not suspend the registration or operator's license of an any owner or registrant of a motor vehicle during the time she or he qualifies for the an exemption under this subsection. An Any owner or registrant of a motor vehicle who qualifies for the an exemption under this subsection shall immediately notify the department before prior to and at the end of the expiration of the exemption.

Section 14. Subsections (1) and (2) of section 324.0221, Florida Statutes, are amended to read:

324.0221 Reports by insurers to the department; suspension of driver license and vehicle registrations; reinstatement.-

(1) (a) Each insurer that has issued a policy providing personal injury protection coverage or property damage liability coverage shall report the cancellation or nonrenewal thereof to the department within 10 days after the processing date or effective date of each cancellation or nonrenewal. Upon the issuance of a policy providing personal injury protection coverage or property damage liability coverage to a named

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insured not previously insured by the insurer during that calendar year, the insurer shall report the issuance of the new policy to the department within 10 days. The report must shall be in the form and format and contain any information required by the department and must be provided in a format that is compatible with the data processing capabilities of the department. Failure by an insurer to file proper reports with the department as required by this subsection constitutes a violation of the Florida Insurance Code. These records may shall be used by the department only for enforcement and regulatory purposes, including the generation by the department of data regarding compliance by owners of motor vehicles with the requirements for financial responsibility coverage.

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

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any owner or registrant of a motor vehicle for with respect to which security is required under s. 324.022, s. 324.032, s. 627.7415, or s. 627.742 ss. 324.022 and 627.733 upon:

- (a) The department's records showing that the owner or registrant of such motor vehicle did not have the in full force and effect when required security in full force and effect that complies with the requirements of ss. 324.022 and 627.733; or
- (b) Notification by the insurer to the department, in a form approved by the department, of cancellation or termination of the required security.

Section 15. Section 324.023, Florida Statutes, is amended to read:

324.023 Financial responsibility for bodily injury or death.—In addition to any other financial responsibility required by law, every owner or operator of a motor vehicle that is required to be registered in this state, or that is located within this state, and who, regardless of adjudication of guilt, has been found quilty of or entered a plea of quilty or nolo contendere to a charge of driving under the influence under s. 316.193 after October 1, 2007, shall, by one of the methods established in s. 324.031(1) (a) or (b) s. 324.031(1) or (2), establish and maintain the ability to respond in damages for liability on account of accidents arising out of the use of a motor vehicle in the amount of \$100,000 because of bodily injury to, or death of, one person in any one crash and, subject to such limits for one person, in the amount of \$300,000 because of bodily injury to, or death of, two or more persons in any one crash and in the amount of \$50,000 because of property damage in any one crash. If the owner or operator chooses to establish and

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maintain such ability by furnishing a certificate of deposit pursuant to s. 324.031(1) (b) s. 324.031(2), such certificate of deposit must be at least \$350,000. Such higher limits must be carried for a minimum period of 3 years. If the owner or operator has not been convicted of driving under the influence or a felony traffic offense for a period of 3 years from the date of reinstatement of driving privileges for a violation of s. 316.193, the owner or operator shall be exempt from this section.

Section 16. Section 324.031, Florida Statutes, is amended to read:

324.031 Manner of proving financial responsibility.-

- (1) The owner or operator of a taxicab, limousine, jitney, or any other for-hire passenger transportation vehicle may prove financial responsibility by providing satisfactory evidence of holding a motor vehicle liability policy as defined in s. 324.021(8) or s. 324.151, which policy is issued by an insurance carrier which is a member of the Florida Insurance Guaranty Association. The operator or owner of a motor vehicle other than a for-hire passenger transportation vehicle any other vehicle may prove his or her financial responsibility by:
- (a) (1) Furnishing satisfactory evidence of holding a motor vehicle liability policy as defined in ss. 324.021(8) and 324.151;
- (b) (2) Furnishing a certificate of self-insurance showing a deposit of cash in accordance with s. 324.161; or
- (c) (3) Furnishing a certificate of self-insurance issued by the department in accordance with s. 324.171.
 - (2) (a) Any person, including any firm, partnership,

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association, corporation, or other person, other than a natural person, electing to use the method of proof specified in paragraph (1)(b) subsection (2) shall furnish a certificate of deposit equal to the number of vehicles owned times:

- 1. Fifty thousand dollars, to a maximum of \$200,000, from January 1, 2019, through December 31, 2020.
- 2. Sixty thousand dollars, to a maximum of \$240,000, from January 1, 2021, through December 31, 2022.
- 3. Seventy thousand dollars, \$30,000, to a maximum of \$280,000, from January 1, 2023, and thereafter. \$120,000;
- (b) In addition, any such person, other than a natural person, shall maintain insurance providing coverage conforming to the requirements of s. 324.151 in excess of the amount of the certificate of deposit, with limits of at least:
- 1. One hundred twenty-five thousand dollars for bodily injury to, or the death of, one person in any one crash and, subject to such limits for one person, in the amount of \$250,000 for bodily injury to, or the death of, two or more persons in any one crash, and \$50,000 for damage to, or destruction of, property of others in any one crash; or \$10,000/20,000/10,000 or \$30,000 combined single limits, and such excess insurance shall provide minimum limits of \$125,000/250,000/50,000 or \$300,000 combined single limits. These increased limits shall not affect the requirements for proving financial responsibility under s. 324.032(1).
- 2. Three hundred thousand dollars for combined bodily injury liability and property damage liability for any one crash.
 - Section 17. Section 324.032, Florida Statutes, is amended



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

- (1) An owner or lessee of a for-hire passenger transportation vehicle that is required to be registered in this state shall establish and continuously maintain the ability to respond in damages for liability on account of accidents arising out of the ownership, maintenance, or use of the for-hire passenger transportation vehicle, in the amount of:
- (a) One hundred twenty-five thousand dollars for bodily injury to, or the death of, one person in any one crash and, subject to such limits for one person, in the amount of \$250,000 for bodily injury to, or the death of, two or more persons in any one crash; and A person who is either the owner or a lessee required to maintain insurance under s. 627.733(1)(b) and who operates one or more taxicabs, limousines, jitneys, or any other for-hire passenger transportation vehicles may prove financial responsibility by furnishing satisfactory evidence of holding a motor vehicle liability policy, but with minimum limits of \$125,000/250,000/50,000.
- (b) Fifty thousand dollars for damage to, or destruction of, property of others in any one crash A person who is either the owner or a lessee required to maintain insurance under s. 324.021(9)(b) and who operates limousines, jitneys, or any other for-hire passenger vehicles, other than taxicabs, may prove financial responsibility by furnishing satisfactory evidence of holding a motor vehicle liability policy as defined in s. 324.031.



(2) Except as provided in subsection (3), the requirements of this section must be met by the owner or lessee providing satisfactory evidence of holding a motor vehicle liability policy conforming to the requirements of s. 324.151 which is issued by an insurance carrier that is a member of the Florida Insurance Guaranty Association.

(3) (2) An owner or a lessee who is required to maintain insurance under s. 324.021(9)(b) and who operates at least 300 taxicabs, limousines, jitneys, or any other for-hire passenger transportation vehicles may provide financial responsibility by complying with the provisions of s. 324.171, such compliance to be demonstrated by maintaining at its principal place of business an audited financial statement, prepared in accordance with generally accepted accounting principles, and providing to the department a certification issued by a certified public accountant that the applicant's net worth is at least equal to the requirements of s. 324.171 as determined by the Office of Insurance Regulation of the Financial Services Commission, including claims liabilities in an amount certified as adequate by a Fellow of the Casualty Actuarial Society.

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Upon request by the department, the applicant shall must provide the department at the applicant's principal place of business in this state access to the applicant's underlying financial information and financial statements that provide the basis of the certified public accountant's certification. The applicant shall reimburse the requesting department for all reasonable costs incurred by it in reviewing the supporting information. The maximum amount of self-insurance permissible under this



subsection is \$300,000 and must be stated on a per-occurrence basis, and the applicant shall maintain adequate excess insurance issued by an authorized or eligible insurer licensed or approved by the Office of Insurance Regulation. All risks self-insured shall remain with the owner or lessee providing it, and the risks are not transferable to any other person, unless a policy complying with subsections (1) and (2) subsection (1) is obtained.

Section 18. Paragraph (b) of subsection (2) of section 324.051, Florida Statutes, is amended to read:

324.051 Reports of crashes; suspensions of licenses and registrations.-

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- (b) This subsection does shall not apply:
- 1. To such operator or owner if such operator or owner had in effect at the time of such crash or traffic conviction a motor vehicle an automobile liability policy with respect to all of the registered motor vehicles owned by such operator or owner.
- 2. To such operator, if not the owner of such motor vehicle, if there was in effect at the time of such crash or traffic conviction a motor vehicle an automobile liability policy or bond with respect to his or her operation of motor vehicles not owned by him or her.
- 3. To such operator or owner if the liability of such operator or owner for damages resulting from such crash is, in the judgment of the department, covered by any other form of liability insurance or bond.
 - 4. To any person who has obtained from the department a



794 certificate of self-insurance, in accordance with s. 324.171, or 795 to any person operating a motor vehicle for such self-insurer.

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No such policy or bond shall be effective under this subsection unless it contains limits of not less than those specified in s. 324.021(7).

Section 19. Section 324.071, Florida Statutes, is amended to read:

324.071 Reinstatement; renewal of license; reinstatement fee. -An Any operator or owner whose license or registration has been suspended pursuant to s. 324.051(2), s. 324.072, s. 324.081, or s. 324.121 may effect its reinstatement upon compliance with the provisions of s. 324.051(2)(a)3. or 4., or s. 324.081(2) and (3), as the case may be, and with one of the provisions of s. 324.031 and upon payment to the department of a nonrefundable reinstatement fee of \$15. Only one such fee may shall be paid by any one person regardless irrespective of the number of licenses and registrations to be then reinstated or issued to such person. All Such fees must shall be deposited to a department trust fund. If When the reinstatement of any license or registration is effected by compliance with s. 324.051(2)(a)3. or 4., the department may shall not renew the license or registration within a period of 3 years after from such reinstatement, nor may shall any other license or registration be issued in the name of such person, unless the operator continues is continuing to comply with one of the provisions of s. 324.031.

Section 20. Subsection (1) of section 324.091, Florida Statutes, is amended to read:

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324.091 Notice to department; notice to insurer.

(1) Each owner and operator involved in a crash or conviction case within the purview of this chapter shall furnish evidence of automobile liability insurance or motor vehicle liability insurance within 14 days after the date of the mailing of notice of crash by the department in the form and manner as it may designate. Upon receipt of evidence that a an automobile liability policy or motor vehicle liability policy was in effect at the time of the crash or conviction case, the department shall forward to the insurer such information for verification in a method as determined by the department. The insurer shall respond to the department within 20 days after the notice as to whether or not such information is valid. If the department determines that a an automobile liability policy or motor vehicle liability policy was not in effect and did not provide coverage for both the owner and the operator, it must shall take action as it is authorized to do under this chapter.

Section 21. Section 324.151, Florida Statutes, is amended to read:

324.151 Motor vehicle liability policies; required provisions.-

- (1) A motor vehicle liability policy that serves as to be proof of financial responsibility under s. 324.031(1) must₇ shall be issued to owners or operators of motor vehicles under the following provisions:
- (a) A motor vehicle An owner's liability insurance policy issued to an owner of a motor vehicle registered in this state must shall designate by explicit description or by appropriate reference all motor vehicles for with respect to which coverage

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is thereby granted. The policy must and shall insure the person or persons owner named therein and any other person as operator using such motor vehicle or motor vehicles with the express or implied permission of such owner against loss from the liability imposed by law for damage arising out of the ownership, maintenance, or use of any such motor vehicle or motor vehicles within the United States or the Dominion of Canada, subject to limits, exclusive of interest and costs with respect to each such motor vehicle as is provided for under s. 324.021(7). Insurers may make available, with respect to property damage liability coverage, a deductible amount not to exceed \$500. In the event of a property damage loss covered by a policy containing a property damage deductible provision, the insurer shall pay to the third-party claimant the amount of any property damage liability settlement or judgment, subject to policy limits, as if no deductible existed.

- (b) An operator's motor vehicle liability policy of insurance must shall insure the person or persons named therein against loss from the liability imposed upon him or her by law for damages arising out of the use by the person of any motor vehicle not owned by him or her, with the same territorial limits and subject to the same limits of liability as referred to above with respect to an owner's policy of liability insurance.
- (c) All such motor vehicle liability policies must shall state the name and address of the named insured, the coverage afforded by the policy, the premium charged therefor, the policy period, the limits of liability, and must shall contain an agreement or be endorsed that insurance is provided in

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accordance with the coverage defined in this chapter as respects bodily injury and death or property damage or both and is subject to all provisions of this chapter. The Said policies must shall also contain a provision that the satisfaction by an insured of a judgment for such injury or damage may shall not be a condition precedent to the right or duty of the insurance carrier to make payment on account of such injury or damage, and must shall also contain a provision that bankruptcy or insolvency of the insured or of the insured's estate may shall not relieve the insurance carrier of any of its obligations under the said policy.

(2) The provisions of This section is shall not be applicable to any automobile liability policy unless and until it is furnished as proof of financial responsibility for the future pursuant to s. 324.031, and then only from and after the date the said policy is so furnished.

Section 22. Section 324.161, Florida Statutes, is amended to read:

324.161 Proof of financial responsibility; deposit.—If a person elects to prove his or her financial responsibility under the method of proof specified in s. 324.031(1)(b), he or she must obtain proof of a certificate of deposit annually, in the amount required under s. 324.031(2), from a financial institution insured by the Federal Deposit Insurance Corporation or the National Credit Union Administration. Proof of such certificate of deposit Annually, before any certificate of insurance may be issued to a person, including any firm, partnership, association, corporation, or other person, other than a natural person, proof of a certificate of deposit of

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\$30,000 issued and held by a financial institution must be submitted to the department annually. A power of attorney will be issued to and held by the department and may be executed upon a judgment issued against such person making the deposit, for damages for because of bodily injury to or death of any person or for damages for because of injury to or destruction of property resulting from the use or operation of any motor vehicle occurring after such deposit was made. Money so deposited is shall not be subject to attachment or execution unless such attachment or execution arises shall arise out of a lawsuit suit for such damages as aforesaid.

Section 23. Subsections (1) and (2) of section 324.171, Florida Statutes, are amended to read:

324.171 Self-insurer.-

- (1) A Any person may qualify as a self-insurer by obtaining a certificate of self-insurance from the department. which may, in its discretion and Upon application of such a person, the department may issue a said certificate of self-insurance if the applicant when such person has satisfied the requirements of this section to qualify as a self-insurer under this section:
- (a) A private individual with private passenger vehicles must shall possess a net unencumbered worth: of
- 1. Beginning January 1, 2019, through December 31, 2020, of at least \$80,000.
- 2. Beginning January 1, 2021, through December 31, 2022, of at least \$100,000.
- 3. Beginning January 1, 2023, and thereafter, of at least \$120,000 \$40,000.
 - (b) A person, including any firm, partnership, association,

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corporation, or other person, other than a natural person, must shall:

- 1. Possess a net unencumbered worth: of
- a. Beginning January 1, 2019, through December 31, 2020, of at least \$80,000 for the first motor vehicle and \$40,000 for each additional motor vehicle.
- b. Beginning January 1, 2021, through December 31, 2022, of at least \$100,000 for the first motor vehicle and \$50,000 for each additional motor vehicle.
- c. Beginning January 1, 2023, and thereafter, of at least \$120,000 \$40,000 for the first motor vehicle and \$60,000 \$20,000for each additional motor vehicle; or
- 2. Maintain sufficient net worth, in an amount determined by the department, to be financially responsible for potential losses. The department shall annually determine the minimum net worth sufficient to satisfy this subparagraph as determined annually by the department, pursuant to rules adopted $\frac{1}{2}$ promulgated by the department, with the assistance of the Office of Insurance Regulation of the Financial Services Commission, to be financially responsible for potential losses. The rules must consider any shall take into consideration excess insurance carried by the applicant. The department's determination must shall be based upon reasonable actuarial principles considering the frequency, severity, and loss development of claims incurred by casualty insurers writing coverage on the type of motor vehicles for which a certificate of self-insurance is desired.
- (c) The owner of a commercial motor vehicle, as defined in s. 207.002 or s. 320.01, may qualify as a self-insurer subject to the standards provided for in subparagraph (b)2.

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

Section 24. Section 324.251, Florida Statutes, is amended to read:

324.251 Short title.—This chapter may be cited as the "Financial Responsibility Law of 2018 1955" and is shall become effective at 12:01 a.m., January 1, 2019 October 1, 1955.

Section 25. Subsection (4) of section 400.9905, Florida Statutes, is amended to read:

400.9905 Definitions.-

- (4) "Clinic" means an entity where health care services are provided to individuals and which tenders charges for reimbursement for such services, including a mobile clinic and a portable equipment provider. As used in this part, the term does not include and the licensure requirements of this part do not apply to:
- (a) Entities licensed or registered by the state under chapter 395; entities licensed or registered by the state and providing only health care services within the scope of services authorized under their respective licenses under ss. 383.30-383.335, chapter 390, chapter 394, chapter 397, this chapter except part X, chapter 429, chapter 463, chapter 465, chapter 466, chapter 478, part I of chapter 483, chapter 484, or chapter 651; end-stage renal disease providers authorized under 42 C.F.R. part 405, subpart U; providers certified under 42 C.F.R. part 485, subpart B or subpart H; or any entity that provides neonatal or pediatric hospital-based health care services or

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other health care services by licensed practitioners solely within a hospital licensed under chapter 395.

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

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practitioners solely within a hospital under chapter 395.

- (d) Entities that are under common ownership, directly or indirectly, with an entity licensed or registered by the state pursuant to chapter 395; entities that are under common ownership, directly or indirectly, with an entity licensed or registered by the state and providing only health care services within the scope of services authorized pursuant to their respective licenses under ss. 383.30-383.335, chapter 390, chapter 394, chapter 397, this chapter except part X, chapter 429, chapter 463, chapter 465, chapter 466, chapter 478, part I of chapter 483, chapter 484, or chapter 651; end-stage renal disease providers authorized under 42 C.F.R. part 405, subpart U; providers certified under 42 C.F.R. part 485, subpart B or subpart H; or any entity that provides neonatal or pediatric hospital-based health care services by licensed practitioners solely within a hospital licensed under chapter 395.
- (e) An entity that is exempt from federal taxation under 26 U.S.C. s. 501(c)(3) or (4), an employee stock ownership plan under 26 U.S.C. s. 409 that has a board of trustees at least two-thirds of which are Florida-licensed health care practitioners and provides only physical therapy services under physician orders, any community college or university clinic, and any entity owned or operated by the federal or state government, including agencies, subdivisions, or municipalities thereof.
- (f) A sole proprietorship, group practice, partnership, or corporation that provides health care services by physicians covered by s. 627.419, that is directly supervised by one or more of such physicians, and that is wholly owned by one or more

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of those physicians or by a physician and the spouse, parent, child, or sibling of that physician.

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

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chapter 459 which are owned by a corporation whose shares are publicly traded on a recognized stock exchange.

- (j) Clinical facilities affiliated with a college of chiropractic accredited by the Council on Chiropractic Education at which training is provided for chiropractic students.
- (k) Entities that provide licensed practitioners to staff emergency departments or to deliver anesthesia services in facilities licensed under chapter 395 and that derive at least 90 percent of their gross annual revenues from the provision of such services. Entities claiming an exemption from licensure under this paragraph must provide documentation demonstrating compliance.
- (1) Orthotic, prosthetic, pediatric cardiology, or perinatology clinical facilities or anesthesia clinical facilities that are not otherwise exempt under paragraph (a) or paragraph (k) and that are a publicly traded corporation or are wholly owned, directly or indirectly, by a publicly traded corporation. As used in this paragraph, a publicly traded corporation is a corporation that issues securities traded on an exchange registered with the United States Securities and Exchange Commission as a national securities exchange.
- (m) Entities that are owned by a corporation that has \$250 million or more in total annual sales of health care services provided by licensed health care practitioners where one or more of the persons responsible for the operations of the entity is a health care practitioner who is licensed in this state and who is responsible for supervising the business activities of the entity and is responsible for the entity's compliance with state law for purposes of this part.



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

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Notwithstanding this subsection, an entity shall be deemed a clinic and must be licensed under this part in order to receive reimbursement under a motor vehicle insurance policy the Florida

Motor Vehicle No-Fault Law, ss. 627.730-627.7405, unless 1141



exempted under s. 627.736(5)(h).

Section 26. Subsection (6) of section 400.991, Florida Statutes, is amended to read:

400.991 License requirements; background screenings; prohibitions.-

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

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INSURANCE FRAUD NOTICE.—A person commits a fraudulent insurance act, as defined in s. 626.989, Florida Statutes, if the person who knowingly submits a false, misleading, or fraudulent application or other document when applying for licensure as a health care clinic, seeking an exemption from licensure as a health care clinic, or demonstrating compliance with part X of chapter 400, Florida Statutes, with the intent to use the license, exemption from licensure, or demonstration of compliance to provide services or seek reimbursement under a motor vehicle liability insurance policy the Florida Motor Vehicle No-Fault Law, commits a fraudulent insurance act, as defined in s. 626.989, Florida Statutes. A person who presents a claim for benefits under a motor vehicle insurance policy, personal injury protection benefits knowing that the payee knowingly submitted such health care clinic application or document, commits insurance fraud, as defined in s. 817.234, Florida Statutes. Section 27. Paragraph (g) of subsection (1) of section

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400.9935, Florida Statutes, is amended to read: 400.9935 Clinic responsibilities.-

- (1) Each clinic shall appoint a medical director or clinic director who shall agree in writing to accept legal responsibility for the following activities on behalf of the clinic. The medical director or the clinic director shall:
- (q) Conduct systematic reviews of clinic billings to ensure that the billings are not fraudulent or unlawful. Upon discovery of an unlawful charge, the medical director or clinic director shall take immediate corrective action. If the clinic performs only the technical component of magnetic resonance imaging, static radiographs, computed tomography, or positron emission tomography, and provides the professional interpretation of such services, in a fixed facility that is accredited by a national accrediting organization that is approved by the Centers for Medicare and Medicaid Services for magnetic resonance imaging and advanced diagnostic imaging services and if, in the preceding quarter, the percentage of scans performed by that clinic which was billed to motor vehicle all personal injury protection insurance carriers was less than 15 percent, the chief financial officer of the clinic may, in a written acknowledgment provided to the agency, assume the responsibility for the conduct of the systematic reviews of clinic billings to ensure that the billings are not fraudulent or unlawful.

Section 28. Subsection (28) of section 409.901, Florida Statutes, is amended to read:

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

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

Section 29. Paragraph (f) of subsection (11) of section 409.910, Florida Statutes, is amended to read:

- 409.910 Responsibility for payments on behalf of Medicaideligible persons when other parties are liable.-
- (11) The agency may, as a matter of right, in order to enforce its rights under this section, institute, intervene in, or join any legal or administrative proceeding in its own name in one or more of the following capacities: individually, as subrogee of the recipient, as assignee of the recipient, or as lienholder of the collateral.
 - (f) Notwithstanding any provision in this section to the

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contrary, in the event of an action in tort against a third party in which the recipient or his or her legal representative is a party which results in a judgment, award, or settlement from a third party, the amount recovered shall be distributed as follows:

- 1. After attorney attorney's fees and taxable costs as defined by the Florida Rules of Civil Procedure, one-half of the remaining recovery shall be paid to the agency up to the total amount of medical assistance provided by Medicaid.
- 2. The remaining amount of the recovery shall be paid to the recipient.
- 3. For purposes of calculating the agency's recovery of medical assistance benefits paid, the fee for services of an attorney retained by the recipient or his or her legal representative shall be calculated at 25 percent of the judgment, award, or settlement.
- 4. Notwithstanding any other provision of this section to the contrary, the agency shall be entitled to all medical coverage benefits up to the total amount of medical assistance provided by Medicaid. For purposes of this paragraph, the term "medical coverage" means any benefits under health insurance, a health maintenance organization, a preferred provider arrangement, or a prepaid health clinic, and the portion of benefits designated for medical payments under coverage for workers' compensation coverage, motor vehicle insurance coverage, personal injury protection, and casualty coverage.

Section 30. Paragraph (k) of subsection (2) of section 456.057, Florida Statutes, is amended to read:

456.057 Ownership and control of patient records; report or

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(2) As used in this section, the terms "records owner," "health care practitioner," and "health care practitioner's employer" do not include any of the following persons or entities; furthermore, the following persons or entities are not

copies of records to be furnished; disclosure of information.-

1263 authorized to acquire or own medical records, but are authorized 1264 under the confidentiality and disclosure requirements of this

1265 section to maintain those documents required by the part or

1266 chapter under which they are licensed or regulated:

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

Section 31. Paragraphs (ee) and (ff) of subsection (1) of section 456.072, Florida Statutes, are amended to read:

456.072 Grounds for discipline; penalties; enforcement.

- (1) The following acts shall constitute grounds for which the disciplinary actions specified in subsection (2) may be taken:
- (ee) With respect to making a motor vehicle insurance personal injury protection claim as required by s. 627.736, intentionally submitting a claim, statement, or bill that has been upcoded. As used in this paragraph, the term "upcoded" means an action that submits a billing code that would result in payment greater in amount than would be paid using a billing code that accurately describes the services performed. The term does not include an otherwise lawful bill by a magnetic resonance imaging facility, which globally combines both technical and professional components, if the amount of the global bill is not more than the components if billed separately; however, payment of such a bill constitutes payment in full for all components of such service "upcoded" as defined



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

Section 32. Paragraphs (i) and (o) of subsection (1) of section 626.9541, Florida Statutes, are amended to read:

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

- (1) UNFAIR METHODS OF COMPETITION AND UNFAIR OR DECEPTIVE ACTS.—The following are defined as unfair methods of competition and unfair or deceptive acts or practices:
 - (i) Unfair claim settlement practices.-
- 1. Attempting to settle claims on the basis of an application, when serving as a binder or intended to become a part of the policy, or any other material document which was altered without notice to, or knowledge or consent of, the insured;
- 2. A material misrepresentation made to an insured or any other person having an interest in the proceeds payable under such contract or policy, for the purpose and with the intent of effecting settlement of such claims, loss, or damage under such contract or policy on less favorable terms than those provided in, and contemplated by, such contract or policy; or
- 3. Committing or performing with such frequency as to indicate a general business practice any of the following:
- a. Failing to adopt and implement standards for the proper investigation of claims;
 - b. Misrepresenting pertinent facts or insurance policy

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provisions relating to coverages at issue;

- c. Failing to acknowledge and act promptly upon communications with respect to claims;
- d. Denying claims without conducting reasonable investigations based upon available information;
- e. Failing to affirm or deny full or partial coverage of claims, and, as to partial coverage, the dollar amount or extent of coverage, or failing to provide a written statement that the claim is being investigated, upon the written request of the insured within 30 days after proof-of-loss statements have been completed;
- f. Failing to promptly provide a reasonable explanation in writing to the insured of the basis in the insurance policy, in relation to the facts or applicable law, for denial of a claim or for the offer of a compromise settlement;
- g. Failing to promptly notify the insured of any additional information necessary for the processing of a claim; or
- h. Failing to clearly explain the nature of the requested information and the reasons why such information is necessary.
- i. Failing to pay personal injury protection insurance claims within the time periods required by s. 627.736(4)(b). The office may order the insurer to pay restitution to a policyholder, medical provider, or other claimant, including interest at a rate consistent with the amount set forth in s. 55.03(1), for the time period within which an insurer fails to pay claims as required by law. Restitution is in addition to any other penalties allowed by law, including, but not limited to, the suspension of the insurer's certificate of authority.
 - 4. Failing to pay undisputed amounts of partial or full

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

- (o) Illegal dealings in premiums; excess or reduced charges for insurance.-
- 1. Knowingly collecting any sum as a premium or charge for insurance, which is not then provided, or is not in due course to be provided, subject to acceptance of the risk by the insurer, by an insurance policy issued by an insurer as permitted by this code.
- 2. Knowingly collecting as a premium or charge for insurance any sum in excess of or less than the premium or charge applicable to such insurance, in accordance with the applicable classifications and rates as filed with and approved by the office, and as specified in the policy; or, in cases when classifications, premiums, or rates are not required by this code to be so filed and approved, premiums and charges collected from a Florida resident in excess of or less than those specified in the policy and as fixed by the insurer. Notwithstanding any other provision of law, this provision shall not be deemed to prohibit the charging and collection, by surplus lines agents licensed under part VIII of this chapter, of the amount of applicable state and federal taxes, or fees as

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authorized by s. 626.916(4), in addition to the premium required by the insurer or the charging and collection, by licensed agents, of the exact amount of any discount or other such fee charged by a credit card facility in connection with the use of a credit card, as authorized by subparagraph (q)3., in addition to the premium required by the insurer. This subparagraph shall not be construed to prohibit collection of a premium for a universal life or a variable or indeterminate value insurance policy made in accordance with the terms of the contract.

- 3.a. Imposing or requesting an additional premium for bodily injury liability coverage, property damage liability coverage a policy of motor vehicle liability, personal injury protection, medical payments coverage payment, or collision coverage in a motor vehicle liability insurance policy insurance or any combination thereof or refusing to renew the policy solely because the insured was involved in a motor vehicle accident unless the insurer's file contains information from which the insurer in good faith determines that the insured was substantially at fault in the accident.
- b. An insurer which imposes and collects such a surcharge or which refuses to renew such policy shall, in conjunction with the notice of premium due or notice of nonrenewal, notify the named insured that he or she is entitled to reimbursement of such amount or renewal of the policy under the conditions listed below and will subsequently reimburse him or her or renew the policy, if the named insured demonstrates that the operator involved in the accident was:
 - (I) Lawfully parked;
 - (II) Reimbursed by, or on behalf of, a person responsible

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for the accident or has a judgment against such person;

- (III) Struck in the rear by another vehicle headed in the same direction and was not convicted of a moving traffic violation in connection with the accident:
- (IV) Hit by a "hit-and-run" driver, if the accident was reported to the proper authorities within 24 hours after discovering the accident;
- (V) Not convicted of a moving traffic violation in connection with the accident, but the operator of the other automobile involved in such accident was convicted of a moving traffic violation;
- (VI) Finally adjudicated not to be liable by a court of competent jurisdiction;
- (VII) In receipt of a traffic citation which was dismissed or nolle prossed; or
- (VIII) Not at fault as evidenced by a written statement from the insured establishing facts demonstrating lack of fault which are not rebutted by information in the insurer's file from which the insurer in good faith determines that the insured was substantially at fault.
- c. In addition to the other provisions of this subparagraph, an insurer may not fail to renew a policy if the insured has had only one accident in which he or she was at fault within the current 3-year period. However, an insurer may nonrenew a policy for reasons other than accidents in accordance with s. 627.728. This subparagraph does not prohibit nonrenewal of a policy under which the insured has had three or more accidents, regardless of fault, during the most recent 3-year period.

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- 4. Imposing or requesting an additional premium for, or refusing to renew, a policy for motor vehicle insurance solely because the insured committed a noncriminal traffic infraction as described in s. 318.14 unless the infraction is:
- a. A second infraction committed within an 18-month period, or a third or subsequent infraction committed within a 36-month period.
- b. A violation of s. 316.183, when such violation is a result of exceeding the lawful speed limit by more than 15 miles per hour.
- 5. Upon the request of the insured, the insurer and licensed agent shall supply to the insured the complete proof of fault or other criteria which justifies the additional charge or cancellation.
- 6. No insurer shall impose or request an additional premium for motor vehicle insurance, cancel or refuse to issue a policy, or refuse to renew a policy because the insured or the applicant is a handicapped or physically disabled person, so long as such handicap or physical disability does not substantially impair such person's mechanically assisted driving ability.
- 7. No insurer may cancel or otherwise terminate any insurance contract or coverage, or require execution of a consent to rate endorsement, during the stated policy term for the purpose of offering to issue, or issuing, a similar or identical contract or coverage to the same insured with the same exposure at a higher premium rate or continuing an existing contract or coverage with the same exposure at an increased premium.
 - 8. No insurer may issue a nonrenewal notice on any

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insurance contract or coverage, or require execution of a consent to rate endorsement, for the purpose of offering to issue, or issuing, a similar or identical contract or coverage to the same insured at a higher premium rate or continuing an existing contract or coverage at an increased premium without meeting any applicable notice requirements.

- 9. No insurer shall, with respect to premiums charged for motor vehicle insurance, unfairly discriminate solely on the basis of age, sex, marital status, or scholastic achievement.
- 10. Imposing or requesting an additional premium for motor vehicle comprehensive or uninsured motorist coverage solely because the insured was involved in a motor vehicle accident or was convicted of a moving traffic violation.
- 11. No insurer shall cancel or issue a nonrenewal notice on any insurance policy or contract without complying with any applicable cancellation or nonrenewal provision required under the Florida Insurance Code.
- 12. No insurer shall impose or request an additional premium, cancel a policy, or issue a nonrenewal notice on any insurance policy or contract because of any traffic infraction when adjudication has been withheld and no points have been assessed pursuant to s. 318.14(9) and (10). However, this subparagraph does not apply to traffic infractions involving accidents in which the insurer has incurred a loss due to the fault of the insured.

Section 33. Paragraph (a) of subsection (1) of section 626.989, Florida Statutes, is amended to read:

626.989 Investigation by department or Division of Investigative and Forensic Services; compliance; immunity;

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confidential information; reports to division; division investigator's power of arrest.-

- (1) For the purposes of this section:
- (a) A person commits a "fraudulent insurance act" if the person:
- 1. Knowingly and with intent to defraud presents, causes to be presented, or prepares with knowledge or belief that it will be presented, to or by an insurer, self-insurer, self-insurance fund, servicing corporation, purported insurer, broker, or any agent thereof, any written statement as part of, or in support of, an application for the issuance of, or the rating of, any insurance policy, or a claim for payment or other benefit pursuant to any insurance policy, which the person knows to contain materially false information concerning any fact material thereto or if the person conceals, for the purpose of misleading another, information concerning any fact material thereto.
 - 2. Knowingly submits:
- a. A false, misleading, or fraudulent application or other document when applying for licensure as a health care clinic, seeking an exemption from licensure as a health care clinic, or demonstrating compliance with part X of chapter 400 with an intent to use the license, exemption from licensure, or demonstration of compliance to provide services or seek reimbursement under a motor vehicle liability insurance policy the Florida Motor Vehicle No-Fault Law.
- b. A claim for payment or other benefit under a motor vehicle pursuant to a personal injury protection insurance policy under the Florida Motor Vehicle No-Fault Law if the

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person knows that the payee knowingly submitted a false, misleading, or fraudulent application or other document when applying for licensure as a health care clinic, seeking an exemption from licensure as a health care clinic, or demonstrating compliance with part X of chapter 400.

Section 34. Subsection (1) of section 627.06501, Florida Statutes, is amended to read:

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

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

Section 35. Subsection (1) of section 627.0652, Florida Statutes, is amended to read:

- 627.0652 Insurance discounts for certain persons completing safety course.-
- (1) Any rates, rating schedules, or rating manuals for the bodily injury and property damage liability coverage, personal injury protection, and collision coverages of a motor vehicle insurance policy filed with the office must shall provide for an

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appropriate reduction in premium charges as to such coverages if when the principal operator on the covered vehicle is an insured 55 years of age or older who has successfully completed a motor vehicle accident prevention course approved by the Department of Highway Safety and Motor Vehicles. Any discount used by an insurer is presumed to be appropriate unless credible data demonstrates otherwise.

Section 36. Subsections (1), (3), and (6) of section 627.0653, Florida Statutes, are amended to read:

627.0653 Insurance discounts for specified motor vehicle equipment.-

- (1) Any rates, rating schedules, or rating manuals for the bodily injury and property damage liability coverage, personal injury protection, and collision coverages of a motor vehicle insurance policy filed with the office must shall provide a premium discount if the insured vehicle is equipped with factory-installed, four-wheel antilock brakes.
- (3) Any rates, rating schedules, or rating manuals for the bodily injury liability personal injury protection coverage and medical payments coverage, if offered, of a motor vehicle insurance policy filed with the office must shall provide a premium discount if the insured vehicle is equipped with one or more air bags that which are factory installed.
- (6) The Office of Insurance Regulation may approve a premium discount to any rates, rating schedules, or rating manuals for the bodily injury and property damage liability coverage, personal injury protection, and collision coverages of a motor vehicle insurance policy filed with the office if the insured vehicle is equipped with autonomous driving technology

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or electronic vehicle collision avoidance technology that is factory installed or a retrofitted system and that complies with National Highway Traffic Safety Administration standards.

Section 37. Section 627.4132, Florida Statutes, is amended to read:

- 627.4132 Stacking of coverages prohibited.—If an insured or named insured is protected by any type of motor vehicle insurance policy for bodily injury and property damage liability, personal injury protection, or other coverage, the policy must shall provide that the insured or named insured is protected only to the extent of the coverage she or he has on the vehicle involved in the accident. However, if none of the insured's or named insured's vehicles are is involved in the accident, coverage is available only to the extent of coverage on any one of the vehicles with applicable coverage. Coverage on any other vehicles may shall not be added to or stacked upon that coverage. This section does not apply:
- (1) To uninsured motorist coverage that which is separately governed by s. 627.727.
- (2) To reduce the coverage available by reason of insurance policies insuring different named insureds.
- Section 38. Section 627.7263, Florida Statutes, is amended to read:
- 627.7263 Rental and leasing driver's insurance to be primary; exception.-
- (1) The valid and collectible bodily injury and property damage liability insurance or personal injury protection insurance providing coverage for the lessor of a motor vehicle for rent or lease is primary unless otherwise stated in at least

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10-point type on the face of the rental or lease agreement. Such insurance is primary for the limits of liability and personal injury protection coverage as required by s. 324.021(7) ss. 324.021(7) and 627.736.

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

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

Section 39. Subsections (1) and (7) of section 627.727, Florida Statutes, are amended, and present subsections (8), (9), and (10) of that section are redesignated as subsections (7), (8), and (9), respectively, to read:

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

(1) A $\frac{1}{100}$ motor vehicle liability insurance policy that which provides bodily injury liability coverage may not shall be delivered or issued for delivery in this state with respect to any specifically insured or identified motor vehicle registered or principally garaged in this state, unless uninsured motor vehicle coverage is provided therein or supplemental thereto for the protection of persons insured thereunder who are legally entitled to recover damages from owners or operators of

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uninsured motor vehicles because of bodily injury, sickness, or disease, including death, resulting therefrom. However, the coverage required under this section is not applicable if when, or to the extent that, an insured named in the policy makes a written rejection of the coverage on behalf of all insureds under the policy. If When a motor vehicle is leased for a period of 1 year or longer and the lessor of such vehicle, by the terms of the lease contract, provides liability coverage on the leased vehicle, the lessee of such vehicle has shall have the sole privilege to reject uninsured motorist coverage or to select lower limits than the bodily injury liability limits, regardless of whether the lessor is qualified as a self-insurer pursuant to s. 324.171. Unless an insured, or lessee having the privilege of rejecting uninsured motorist coverage, requests such coverage or requests higher uninsured motorist limits in writing, the coverage or such higher uninsured motorist limits need not be provided in or supplemental to any other policy which renews, extends, changes, supersedes, or replaces an existing policy with the same bodily injury liability limits when an insured or lessee had rejected the coverage. When an insured or lessee has initially selected limits of uninsured motorist coverage lower than her or his bodily injury liability limits, higher limits of uninsured motorist coverage need not be provided in or supplemental to any other policy that which renews, extends, changes, supersedes, or replaces an existing policy with the same bodily injury liability limits unless an insured requests higher uninsured motorist coverage in writing. The rejection or selection of lower limits must shall be made on a form approved by the office. The form must shall fully advise the applicant of

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the nature of the coverage and must shall state that the coverage is equal to bodily injury liability limits unless lower limits are requested or the coverage is rejected. The heading of the form must shall be in 12-point bold type and must shall state: "You are electing not to purchase certain valuable coverage that which protects you and your family or you are purchasing uninsured motorist limits less than your bodily injury liability limits when you sign this form. Please read carefully." If this form is signed by a named insured, it will be conclusively presumed that there was an informed, knowing rejection of coverage or election of lower limits on behalf of all insureds. The insurer shall notify the named insured at least annually of her or his options as to the coverage required by this section. Such notice must shall be part of, and attached to, the notice of premium, must shall provide for a means to allow the insured to request such coverage, and must shall be given in a manner approved by the office. Receipt of this notice does not constitute an affirmative waiver of the insured's right to uninsured motorist coverage if where the insured has not signed a selection or rejection form. The coverage described under this section must shall be over and above, but may shall not duplicate, the benefits available to an insured under any workers' compensation law, personal injury protection benefits, disability benefits law, or similar law; under any automobile medical payments expense coverage; under any motor vehicle liability insurance coverage; or from the owner or operator of the uninsured motor vehicle or any other person or organization jointly or severally liable together with such owner or operator for the accident; and such coverage must shall cover the

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difference, if any, between the sum of such benefits and the damages sustained, up to the maximum amount of such coverage provided under this section. The amount of coverage available under this section may shall not be reduced by a setoff against any coverage, including liability insurance. Such coverage does shall not inure directly or indirectly to the benefit of any workers' compensation or disability benefits carrier or any person or organization qualifying as a self-insurer under any workers' compensation or disability benefits law or similar law.

(7) The legal liability of an uninsured motorist coverage insurer does not include damages in tort for pain, suffering, mental anguish, and inconvenience unless the injury or disease is described in one or more of paragraphs (a) - (d) of s. 627.737(2).

Section 40. Section 627.7275, Florida Statutes, is amended to read:

627.7275 Motor vehicle liability; bad faith actions; insurer liability; requirements and construction.-

- (1) A motor vehicle insurance policy providing personal injury protection as set forth in s. 627.736 may not be delivered or issued for delivery in this state for a with respect to any specifically insured or identified motor vehicle registered or principally garaged in this state must provide bodily injury liability coverage and unless the policy also provides coverage for property damage liability coverage as required under by s. 324.022.
- (2)(a) Insurers writing motor vehicle insurance in this state shall make available, subject to the insurers' usual underwriting restrictions:

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- 1. Coverage under policies as described in subsection (1) to an applicant for private passenger motor vehicle insurance coverage who is seeking the coverage in order to reinstate the applicant's driving privileges in this state if the driving privileges were revoked or suspended pursuant to s. 316.646 or s. 324.0221 due to the failure of the applicant to maintain required security.
- 2. Coverage under policies as described in subsection (1), which includes bodily injury also provides liability coverage and property damage liability coverage for bodily injury, death, and property damage arising out of the ownership, maintenance, or use of the motor vehicle in an amount not less than the minimum limits required under described in s. 324.021(7) or s. 324.023 and which conforms to the requirements of s. 324.151, to an applicant for private passenger motor vehicle insurance coverage who is seeking the coverage in order to reinstate the applicant's driving privileges in this state after such privileges were revoked or suspended under s. 316.193 or s. 322.26(2) for driving under the influence.
- (b) The policies described in paragraph (a) must shall be issued for at least 6 months and, as to the minimum coverages required under this section, may not be canceled by the insured for any reason or by the insurer after 60 days, during which period the insurer is completing the underwriting of the policy. After the insurer has completed underwriting the policy, the insurer shall notify the Department of Highway Safety and Motor Vehicles that the policy is in full force and effect and is not cancelable for the remainder of the policy period. A premium must shall be collected and the coverage is in effect for the

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60-day period during which the insurer is completing the underwriting of the policy, whether or not the person's driver license, motor vehicle tag, and motor vehicle registration are in effect. Once the noncancelable provisions of the policy become effective, the bodily injury liability and property damage liability coverages for bodily injury, property damage, and personal injury protection may not be reduced below the minimum limits required under s. 324.021 or s. 324.023 during the policy period.

- (c) This subsection controls to the extent of any conflict with any other section.
- (d) An insurer issuing a policy subject to this section may cancel the policy if, during the policy term, the named insured, or any other operator who resides in the same household or customarily operates an automobile insured under the policy, has his or her driver license suspended or revoked.
- (e) This subsection does not require an insurer to offer a policy of insurance to an applicant if such offer would be inconsistent with the insurer's underwriting guidelines and procedures.
- (3) (a) As a condition precedent to a statutory or common law action for a bad faith failure to settle a motor vehicle liability claim, the insured, claimant, or the representative of the insured or claimant must provide the insurer with a written notice of loss. If the motor vehicle liability insurer complies with a request for a disclosure statement described in s. 627.4137, and, within 45 days after receipt of the written notice of loss, offers to pay the claimant the lesser of the amount the claimant is willing to accept or the limits of the

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motor vehicle liability coverage applicable to the claimant's claim in exchange for full release of the insureds from any liability arising from the incident and the notice of loss, the insurer does not violate the duty to attempt in good faith to settle the claim and is not liable for a bad faith failure to settle under this section or under the common law.

- (b) In evaluating whether the insurer attempted in good faith to settle the claim when, under the totality of the circumstances, it could have and should have done so had it acted fairly and honestly toward its insured and with due regard for his or her interests, the trier of fact must also consider whether the insured, claimant, or representative of the insured or claimant made good faith efforts to cooperate with the insurer in the investigation of the claim.
- (c) If two or more third-party claimants in a motor vehicle liability claim make competing claims arising out of a single occurrence which in total exceed the available policy limits of one or more of the insured parties who may be liable to the third-party claimants, an insurer is not liable beyond the available policy limits for failure to pay all or any portion of the available policy limits to one or more of the third-party claimants, if, within 90 days after receiving notice of the competing claims in excess of the available policy limits, the insurer files an interpleader action under the Florida Rules of Civil Procedure. The claims of the competing third-party claimants are entitled to a prorated share of the policy limits as determined by the trier of fact. An insurer's interpleader action does not alter or amend the insurer's obligation to defend its insured.



1809 Section 41. Paragraph (a) of subsection (1) of section 627.728, Florida Statutes, is amended to read: 1810 627.728 Cancellations; nonrenewals.-1811 1812 (1) As used in this section, the term: 1813 (a) "Policy" means the bodily injury and property damage 1814 liability, personal injury protection, medical payments, comprehensive, collision, and uninsured motorist coverage 1815 1816 portions of a policy of motor vehicle insurance delivered or 1817 issued for delivery in this state: 1818 1. Insuring a natural person as named insured or one or 1819 more related individuals who are residents resident of the same 1820 household; and 1821 2. Insuring only a motor vehicle of the private passenger 1822 type or station wagon type which is not used as a public or 1823 livery conveyance for passengers or rented to others; or 1824 insuring any other four-wheel motor vehicle having a load 1825 capacity of 1,500 pounds or less which is not used in the 1826 occupation, profession, or business of the insured other than 1827 farming; other than any policy issued under an automobile 1828 insurance assigned risk plan or covering garage, automobile 1829 sales agency, repair shop, service station, or public parking 1830 place operation hazards.

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

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Section 42. Subsection (1), paragraph (a) of subsection (5), and subsections (6) and (7) of section 627.7295, Florida Statutes, are amended to read:

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627.7295 Motor vehicle insurance contracts.-

- (1) As used in this section, the term:
- (a) "Policy" means a motor vehicle insurance policy that provides bodily injury liability personal injury protection coverage, property damage liability coverage, or both.
- (b) "Binder" means a binder that provides motor vehicle bodily injury liability coverage, personal injury protection and property damage liability coverage.
- (5)(a) A licensed general lines agent may charge a perpolicy fee up to not to exceed \$10 to cover the administrative costs of the agent associated with selling the motor vehicle insurance policy if the policy covers only bodily injury liability coverage personal injury protection coverage as provided by s. 627.736 and property damage liability coverage as provided by s. 627.7275 and if no other insurance is sold or issued in conjunction with or collateral to the policy. The fee is not considered part of the premium.
- (6) If a motor vehicle owner's driver license, license plate, and registration have previously been suspended pursuant to s. 316.646 or s. 627.733, an insurer may cancel a new policy only as provided in s. 627.7275.
- (7) A policy of private passenger motor vehicle insurance or a binder for such a policy may be initially issued in this state only if, before the effective date of such binder or policy, the insurer or agent has collected from the insured an amount equal to 2 months' premium from the insured. An insurer, agent, or premium finance company may not, directly or indirectly, take any action that results resulting in the insured paying having paid from the insured's own funds an

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amount less than the 2 months' premium required by this subsection. This subsection applies without regard to whether the premium is financed by a premium finance company or is paid pursuant to a periodic payment plan of an insurer or an insurance agent.

- (a) This subsection does not apply:
- 1. If an insured or member of the insured's family is renewing or replacing a policy or a binder for such policy written by the same insurer or a member of the same insurer group. This subsection does not apply
- 2. To an insurer that issues private passenger motor vehicle coverage primarily to active duty or former military personnel or their dependents. This subsection does not apply
- 3. If all policy payments are paid pursuant to a payroll deduction plan, an automatic electronic funds transfer payment plan from the policyholder, or a recurring credit card or debit card agreement with the insurer.
 - (b) This subsection and subsection (4) do not apply if:
- 1. All policy payments to an insurer are paid pursuant to an automatic electronic funds transfer payment plan from an agent, a managing general agent, or a premium finance company and if the policy includes, at a minimum, bodily injury liability coverage and personal injury protection pursuant to ss. 627.730-627.7405; motor vehicle property damage liability coverage pursuant to s. 627.7275; or and bodily injury liability in at least the amount of \$10,000 because of bodily injury to, or death of, one person in any one accident and in the amount of \$20,000 because of bodily injury to, or death of, two or more persons in any one accident. This subsection and subsection (4)



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2. An insured has had a policy in effect for at least 6 months, the insured's agent is terminated by the insurer that issued the policy, and the insured obtains coverage on the policy's renewal date with a new company through the terminated agent.

Section 43. Subsections (1) and (2) of section 627.7415, Florida Statutes, are amended to read:

- 627.7415 Commercial motor vehicles; additional liability insurance coverage. - Commercial motor vehicles, as defined in s. 207.002 or s. 320.01, operated upon the roads and highways of this state shall be insured with the following minimum levels of combined bodily liability insurance and property damage liability insurance under subsections (1) and (2) in addition to any other insurance requirements. ÷
- (1) Fifty thousand dollars per occurrence For a commercial motor vehicle with a gross vehicle weight of 26,000 pounds or more, but less than 35,000 pounds:
- (a) Beginning January 1, 2019, through December 31, 2020, no less than \$50,000 per occurrence.
- (b) Beginning January 1, 2021, through December 31, 2022, no less than \$60,000 per occurrence.
- (c) Beginning January 1, 2023, and thereafter, no less than \$70,000 per occurrence.
- (2) One hundred thousand dollars per occurrence For a commercial motor vehicle with a gross vehicle weight of 35,000 pounds or more, but less than 44,000 pounds:
- (a) Beginning January 1, 2019, through December 31, 2020, no less than \$100,000 per occurrence.



1925 (b) Beginning January 1, 2021, through December 31, 2022, 1926 no less than \$120,000 per occurrence. 1927 (c) Beginning January 1, 2023, and thereafter, no less than 1928 \$140,000 per occurrence. 1929 A violation of this section is a noncriminal traffic infraction, 1930 1931 punishable as a nonmoving violation as provided in chapter 318. 1932 Section 44. Section 627.8405, Florida Statutes, is amended 1933 to read: 1934 627.8405 Prohibited acts; financing companies.—A No premium 1935 finance company shall, in a premium finance agreement or other 1936 agreement, may not finance the cost of or otherwise provide for 1937 the collection or remittance of dues, assessments, fees, or 1938 other periodic payments of money for the cost of: 1939 (1) A membership in an automobile club. The term 1940 "automobile club" means a legal entity that which, in 1941 consideration of dues, assessments, or periodic payments of 1942 money, promises its members or subscribers to assist them in 1943 matters relating to the ownership, operation, use, or 1944 maintenance of a motor vehicle; however, the term this 1945 definition of "automobile club" does not include persons, 1946 associations, or corporations which are organized and operated 1947 solely for the purpose of conducting, sponsoring, or sanctioning

(2) An accidental death and dismemberment policy sold in

motor vehicle races, exhibitions, or contests upon racetracks,

or upon racecourses established and marked as such for the

duration of such particular events. The term words "motor

vehicle" used herein has have the same meaning as defined in

chapter 320.

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combination with a policy providing only bodily injury liability coverage personal injury protection and property damage liability coverage only policy.

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

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

Section 45. Subsection (1) of section 627.915, Florida Statutes, is amended to read:

627.915 Insurer experience reporting.-

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



1983 writings and must shall be reported on a calendar-accident year 1984 basis ultimately seven times at seven different stages of 1985 development. 1986 (a) Premiums earned for the latest 3 calendar-accident 1987 years. (b) Loss development factors and the historic development 1988 1989 of those factors. 1990 (c) Policyholder dividends incurred. 1991 (d) Expenses for other acquisition and general expense. 1992 (e) Expenses for agents' commissions and taxes, licenses, 1993 and fees. 1994 (f) Profit and contingency factors as utilized in the 1995 insurer's automobile rate filings for the applicable years. 1996 (g) Losses paid. 1997 (h) Losses unpaid. 1998 (i) Loss adjustment expenses paid. 1999 (j) Loss adjustment expenses unpaid. 2000 Section 46. Subsections (2) and (3) of section 628.909, 2001 Florida Statutes, are amended to read: 2002 628.909 Applicability of other laws.-2003 (2) The following provisions of the Florida Insurance Code 2004 apply to captive insurance companies who are not industrial 2005 insured captive insurance companies to the extent that such 2006 provisions are not inconsistent with this part: 2007 (a) Chapter 624, except for ss. 624.407, 624.408, 624.4085, 2008 624.40851, 624.4095, 624.411, 624.425, and 624.426. 2009 (b) Chapter 625, part II.

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

(c) Chapter 626, part IX.

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(e) Chapter 628.

- (3) The following provisions of the Florida Insurance Code shall apply to industrial insured captive insurance companies to the extent that such provisions are not inconsistent with this part:
- (a) Chapter 624, except for ss. 624.407, 624.408, 624.4085, 624.40851, 624.4095, 624.411, 624.425, 624.426, and 624.609(1).
- (b) Chapter 625, part II, if the industrial insured captive insurance company is incorporated in this state.
 - (c) Chapter 626, part IX.
- (d) Sections 627.730-627.7405 when no-fault coverage is provided.
- (e) Chapter 628, except for ss. 628.341, 628.351, and 628.6018.
- Section 47. Subsections (2), (6), and (7) of section 705.184, Florida Statutes, are amended to read:
- 705.184 Derelict or abandoned motor vehicles on the premises of public-use airports.-
- (2) The airport director or the director's designee shall contact the Department of Highway Safety and Motor Vehicles to notify that department that the airport has possession of the abandoned or derelict motor vehicle and to determine the name and address of the owner of the motor vehicle, the insurance company insuring the motor vehicle, notwithstanding the provisions of s. 627.736, and any person who has filed a lien on the motor vehicle. Within 7 business days after receipt of the information, the director or the director's designee shall send notice by certified mail, return receipt requested, to the owner

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of the motor vehicle, the insurance company insuring the motor vehicle, notwithstanding the provisions of s. 627.736, and all persons of record claiming a lien against the motor vehicle. The notice must shall state the fact of possession of the motor vehicle, that charges for reasonable towing, storage, and parking fees, if any, have accrued and the amount thereof, that a lien as provided in subsection (6) will be claimed, that the lien is subject to enforcement pursuant to law, that the owner or lienholder, if any, has the right to a hearing as set forth in subsection (4), and that any motor vehicle which, at the end of 30 calendar days after receipt of the notice, has not been removed from the airport upon payment in full of all accrued charges for reasonable towing, storage, and parking fees, if any, may be disposed of as provided in s. 705.182(2)(a), (b), (d), or (e), including, but not limited to, the motor vehicle being sold free of all prior liens after 35 calendar days after the time the motor vehicle is stored if any prior liens on the motor vehicle are more than 5 years of age or after 50 calendar days after the time the motor vehicle is stored if any prior liens on the motor vehicle are 5 years of age or less.

(6) The airport pursuant to this section or, if used, a licensed independent wrecker company pursuant to s. 713.78 shall have a lien on an abandoned or derelict motor vehicle for all reasonable towing, storage, and accrued parking fees, if any, except that no storage fee may shall be charged if the motor vehicle is stored less than 6 hours. As a prerequisite to perfecting a lien under this section, the airport director or the director's designee must serve a notice in accordance with subsection (2) on the owner of the motor vehicle, the insurance

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company insuring the motor vehicle, notwithstanding the provisions of s. 627.736, and all persons of record claiming a lien against the motor vehicle. If attempts to notify the owner, the insurance company insuring the motor vehicle, notwithstanding the provisions of s. 627.736, or lienholders are not successful, the requirement of notice by mail shall be considered met. Serving of the notice does not dispense with recording the claim of lien.

- (7)(a) For the purpose of perfecting its lien under this section, the airport shall record a claim of lien which states shall state:
 - 1. The name and address of the airport.
- 2. The name of the owner of the motor vehicle, the insurance company insuring the motor vehicle, notwithstanding the provisions of s. 627.736, and all persons of record claiming a lien against the motor vehicle.
- 3. The costs incurred from reasonable towing, storage, and parking fees, if any.
- 4. A description of the motor vehicle sufficient for identification.
- (b) The claim of lien must shall be signed and sworn to or affirmed by the airport director or the director's designee.
- (c) The claim of lien is shall be sufficient if it is in substantially the following form:

2095 CLAIM OF LIEN

2096 State of

2097 County of

Before me, the undersigned notary public, personally appeared 2098



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2099	, who was duly sworn and says that he/she is the
2100	of, whose address is; and that the
2101	following described motor vehicle:
2102	(Description of motor vehicle)
2103	owned by, whose address is, has accrued
2104	\$ in fees for a reasonable tow, for storage, and for
2105	parking, if applicable; that the lienor served its notice to the
2106	owner, the insurance company insuring the motor vehicle
2107	notwithstanding the provisions of s. 627.736, Florida Statutes,
2108	and all persons of record claiming a lien against the motor
2109	vehicle on,(year), by
2110	(Signature)
2111	Sworn to (or affirmed) and subscribed before me this day of
2112	,(year), by(name of person making statement)
2113	(Signature of Notary Public)(Print, Type, or Stamp
2114	Commissioned name of Notary Public)
2115	Personally KnownOR Producedas identification.
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2117	However, the negligent inclusion or omission of any information
2118	in this claim of lien which does not prejudice the owner does
2119	not constitute a default that operates to defeat an otherwise
2120	valid lien.
2121	(d) The claim of lien <u>must</u> shall be served on the owner of
2122	the motor vehicle, the insurance company insuring the motor
2123	vehicle, notwithstanding the provisions of s. 627.736, and all
2124	persons of record claiming a lien against the motor vehicle. If
2125	attempts to notify the owner, the insurance company insuring the
2126	motor vehicle notwithstanding the provisions of s. 627.736 , or
2127	lienholders are not successful, the requirement of notice by

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mail shall be considered met. The claim of lien must shall be so served before recordation.

(e) The claim of lien must shall be recorded with the clerk of court in the county where the airport is located. The recording of the claim of lien shall be constructive notice to all persons of the contents and effect of such claim. The lien attaches shall attach at the time of recordation and takes shall take priority as of that time.

Section 48. Subsection (4) of section 713.78, Florida Statutes, is amended to read:

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

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

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

(c) Notice by certified mail must shall be sent within 7 business days after the date of storage of the vehicle or vessel to the registered owner, the insurance company insuring the vehicle notwithstanding the provisions of s. 627.736, and all persons of record claiming a lien against the vehicle or vessel. The notice must It shall state the fact of possession of the vehicle or vessel, that a lien as provided in subsection (2) is claimed, that charges have accrued and the amount thereof, that the lien is subject to enforcement pursuant to law, and that the owner or lienholder, if any, has the right to a hearing as set

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forth in subsection (5), and that any vehicle or vessel which remains unclaimed, or for which the charges for recovery, towing, or storage services remain unpaid, may be sold free of all prior liens after 35 days if the vehicle or vessel is more than 3 years of age or after 50 days if the vehicle or vessel is 3 years of age or less.

- (d) If attempts to locate the name and address of the owner or lienholder prove unsuccessful, the towing-storage operator must shall, after 7 working days, excluding Saturday and Sunday, of the initial tow or storage, notify the public agency of jurisdiction where the vehicle or vessel is stored in writing by certified mail or acknowledged hand delivery that the towingstorage company has been unable to locate the name and address of the owner or lienholder and a physical search of the vehicle or vessel has disclosed no ownership information and a good faith effort has been made, including records checks of the Department of Highway Safety and Motor Vehicles database and the National Motor Vehicle Title Information System or an equivalent commercially available system. As used in For purposes of this paragraph and subsection (9), the term "good faith effort" means that the following checks have been performed by the company to establish prior state of registration and for title:
- 1. Check of the Department of Highway Safety and Motor Vehicles database for the owner and any lienholder.
- 2. Check of the electronic National Motor Vehicle Title Information System or an equivalent commercially available system to determine the state of registration when there is not a current registration record for the vehicle on file with the Department of Highway Safety and Motor Vehicles.

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- 2215 3. Check of vehicle or vessel for any type of tag, tag 2216 record, temporary tag, or regular tag.
 - 4. Check of law enforcement report for tag number or other information identifying the vehicle or vessel, if the vehicle or vessel was towed at the request of a law enforcement officer.
 - 5. Check of trip sheet or tow ticket of tow truck operator to see if a tag was on vehicle or vessel at beginning of tow, if private tow.
 - 6. If there is no address of the owner on the impound report, check of law enforcement report to see if an out-ofstate address is indicated from driver license information.
 - 7. Check of vehicle or vessel for inspection sticker or other stickers and decals that may indicate a state of possible registration.
 - 8. Check of the interior of the vehicle or vessel for any papers that may be in the glove box, trunk, or other areas for a state of registration.
 - 9. Check of vehicle for vehicle identification number.
 - 10. Check of vessel for vessel registration number.
 - 11. Check of vessel hull for a hull identification number which should be carved, burned, stamped, embossed, or otherwise permanently affixed to the outboard side of the transom or, if there is no transom, to the outmost seaboard side at the end of the hull that bears the rudder or other steering mechanism.

Section 49. Paragraph (a) of subsection (1), paragraph (c) of subsection (7), paragraphs (a), (b), and (c) of subsection (8), and subsections (9) and (10) of section 817.234, Florida Statutes, are amended to read:

817.234 False and fraudulent insurance claims.-

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- (1) (a) A person commits insurance fraud punishable as provided in subsection (11) if that person, with the intent to injure, defraud, or deceive any insurer:
- 1. Presents or causes to be presented any written or oral statement as part of, or in support of, a claim for payment or other benefit pursuant to an insurance policy or a health maintenance organization subscriber or provider contract, knowing that such statement contains any false, incomplete, or misleading information concerning any fact or thing material to such claim;
- 2. Prepares or makes any written or oral statement that is intended to be presented to an any insurer in connection with, or in support of, any claim for payment or other benefit pursuant to an insurance policy or a health maintenance organization subscriber or provider contract, knowing that such statement contains any false, incomplete, or misleading information concerning any fact or thing material to such claim;
- 3.a. Knowingly presents, causes to be presented, or prepares or makes with knowledge or belief that it will be presented to an any insurer, purported insurer, servicing corporation, insurance broker, or insurance agent, or any employee or agent thereof, any false, incomplete, or misleading information or a written or oral statement as part of, or in support of, an application for the issuance of, or the rating of, any insurance policy, or a health maintenance organization subscriber or provider contract; or
- b. Knowingly conceals information concerning any fact material to such application; or
 - 4. Knowingly presents, causes to be presented, or prepares



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

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

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

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- (b) A person may not solicit or cause to be solicited any business from a person involved in a motor vehicle accident by any means of communication other than advertising directed to the public for the purpose of making motor vehicle tort claims or claims for benefits under a motor vehicle insurance policy personal injury protection benefits required by s. 627.736, within 60 days after the occurrence of the motor vehicle accident. Any person who violates this paragraph commits a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.
- (c) A lawyer, health care practitioner as defined in s. 456.001, or owner or medical director of a clinic required to be licensed pursuant to s. 400.9905 may not, at any time after 60 days have elapsed from the occurrence of a motor vehicle accident, solicit or cause to be solicited any business from a person involved in a motor vehicle accident by means of in person or telephone contact at the person's residence, for the purpose of making motor vehicle tort claims or claims for benefits under a motor vehicle insurance policy personal injury protection benefits required by s. 627.736. Any person who violates this paragraph commits a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.
- (9) A person may not organize, plan, or knowingly participate in an intentional motor vehicle crash or a scheme to create documentation of a motor vehicle crash that did not occur for the purpose of making motor vehicle tort claims or claims for benefits under a motor vehicle insurance policy personal injury protection benefits as required by s. 627.736. Any person who violates this subsection commits a felony of the second

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2331 degree, punishable as provided in s. 775.082, s. 775.083, or s. 2332 775.084. A person who is convicted of a violation of this 2333 subsection shall be sentenced to a minimum term of imprisonment 2334 of 2 years.

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

Section 50. Applicability and construction; notice to policyholders.-

- (1) As used in this section, the term "minimum security requirements" means security that enables a person to respond in damages for liability on account of crashes arising out of the ownership, maintenance, or use of a motor vehicle in the amounts required by s. 324.021(7), Florida Statutes.
 - (2) Effective January 1, 2019:
- (a) Motor vehicle insurance policies issued or renewed on or after that date may not include personal injury protection.
- (b) All persons subject to s. 324.022, s. 324.032, s. 627.7415, or s. 627.742, Florida Statutes, must maintain at least minimum security requirements.
- (c) Any new or renewal motor vehicle insurance policy delivered or issued for delivery in this state must provide coverage that complies with minimum security requirements.
- (d) An existing motor vehicle insurance policy issued before that date which provides personal injury protection and property damage liability coverage that meets the requirements



2360 of s. 324.022, Florida Statutes, on December 31, 2018, but which 2361 does not meet minimum security requirements on or after January 2362 1, 2019, is deemed to meet the security requirements of s. 2363 324.022, Florida Statutes, until such policy is renewed, 2364 nonrenewed, or canceled on or after January 1, 2019. 2365 (3) Each insurer shall allow each insured who has a new or renewal policy providing personal injury protection, which 2366 becomes effective before January 1, 2019, and whose policy does 2367 2368 not meet minimum security requirements on or after January 1, 2369 2019, to change coverages so as to eliminate personal injury 2370 protection and obtain coverage providing minimum security 2371 requirements, which shall be effective on or after January 1, 2372 2019. The insurer is not required to provide coverage complying 2373 with minimum security requirements in such policies if the 2374 insured does not pay the required premium, if any, by January 1, 2375 2019, or such later date as the insurer may allow. Any reduction in the premium must be refunded by the insurer. The insurer may 2376 2.377 not impose on the insured an additional fee or charge that 2378 applies solely to a change in coverage; however, the insurer may 2379 charge an additional required premium that is actuarially 2380 indicated. 2381 (4) By September 1, 2018, each motor vehicle insurer shall 2382 provide notice of this section to each motor vehicle 2383 policyholder who is subject to this section. The notice is 2384 subject to approval by the Office of Insurance Regulation and 2385 must clearly inform the policyholder that: 2386 (a) The Florida Motor Vehicle No-Fault Law is repealed,

effective January 1, 2019, and that on or after that date, the

insured is no longer required to maintain personal injury

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protection insurance coverage, that personal injury protection coverage is no longer available for purchase in this state, and that all new or renewal policies issued on or after that date do not contain such coverage.

- (b) Effective January 1, 2019, a person subject to the financial responsibility requirements of s. 324.022, Florida Statutes, must maintain minimum security requirements that enable the person to respond in damages for liability on account of accidents arising out of the use of a motor vehicle in the following amounts:
- 1. Beginning January 1, 2019, and continuing through December 31, 2020:
- a. Twenty thousand dollars for bodily injury to, or the death of, one person in any one crash and, subject to such limits for one person, in the amount of \$40,000 for bodily injury to, or the death of, two or more persons in any one crash; and
- b. Ten thousand dollars for damage to, or destruction of, the property of others in any one crash.
- 2. Beginning January 1, 2021, and continuing through December 31, 2022:
- a. Twenty-five thousand dollars for bodily injury to, or the death of, one person in any one crash and, subject to such limits for one person, in the amount of \$50,000 for bodily injury to, or the death of, two or more persons in any one crash; and
- 2415 b. Ten thousand dollars for damage to, or destruction of, 2416 the property of others in any one crash.
 - 3. Beginning January 1, 2023, and continuing thereafter:

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- a. Thirty thousand dollars for bodily injury to, or the death of, one person in any one crash and, subject to such limits for one person, in the amount of \$60,000 for bodily injury to, or the death of, two or more persons in any one crash; and
- b. Ten thousand dollars for damage to, or destruction of, the property of others in any one crash.
- (c) Personal injury protection insurance paid covered medical expenses for injuries sustained in a motor vehicle crash by the policyholder, passengers, and relatives residing in the policyholder's household.
- (d) Bodily injury liability coverage protects the insured, up to the coverage limits, against loss if the insured is legally responsible for the death of or bodily injury to others in a motor vehicle accident.
- (e) The policyholder may obtain underinsured motorist coverage, which provides benefits, up to the limits of such coverage, to a policyholder or other insured entitled to recover damages for bodily injury, sickness, disease, or death resulting from a motor vehicle accident with an uninsured or underinsured owner or operator of a motor vehicle.
- (f) If the policyholder's new or renewal motor vehicle insurance policy is effective before January 1, 2019, and contains personal injury protection and property damage liability coverage as required by state law before January 1, 2019, but does not meet minimum security requirements on or after January 1, 2019, the policy is deemed to meet minimum security requirements until it is renewed, nonrenewed, or canceled on or after January 1, 2019.

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(g) A policyholder whose new or renewal policy becomes effective before January 1, 2019, but does not meet minimum security requirements on or after January 1, 2019, may change coverages under the policy so as to eliminate personal injury protection and to obtain coverage providing minimum security requirements, including bodily injury liability coverage, which are effective on or after January 1, 2019. (h) If the policyholder has any questions, he or she should contact the person named at the telephone number provided in the notice. (5) This section takes effect upon this act becoming a law.

Section 51. Application of suspensions for failure to maintain security; reinstatement. - All suspensions for failure to maintain required security as required by law in effect before January 1, 2019, remain in full force and effect after January 1, 2019. A driver may reinstate a suspended driver license or registration as provided under s. 324.0221, Florida Statutes.

Section 52. Except as otherwise expressly provided in this act and except for this section, which shall take effect upon this act becoming a law, this act shall take effect January 1, 2019.

2469 ======= T I T L E A M E N D M E N T ========= 2470 And the title is amended as follows:

Delete everything before the enacting clause and insert:

> A bill to be entitled An act relating to motor vehicle insurance; repealing ss. 627.730, 627.731, 627.7311, 627.732, 627.733,

> > Page 86 of 92

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627.734, 627.736, 627.737, 627.739, 627.7401, 627.7403, and 627.7405, F.S., which comprise the Florida Motor Vehicle No-Fault Law; repealing s. 627.7407, F.S., relating to application of the Florida Motor Vehicle No-Fault Law; amending s. 316.646, F.S.; revising a requirement for proof of security on a motor vehicle and the applicability of the requirement; amending s. 318.18, F.S.; conforming a provision to changes made by the act; amending s. 320.02, F.S.; revising the motor vehicle insurance coverages that an applicant must show to register certain vehicles with the Department of Highway Safety and Motor Vehicles; deleting a requirement that specified information be included on a certain insurance proof-of-purchase card; revising construction; conforming provisions to changes made by the act; amending s. 320.0609, F.S.; conforming a provision to changes made by the act; amending s. 320.27, F.S.; defining the term "garage liability insurance"; revising garage liability insurance requirements for motor vehicle dealer applicants; conforming a provision to changes made by the act; amending s. 320.771, F.S.; revising garage liability insurance requirements for recreational vehicle dealer license applicants; amending ss. 322.251 and 322.34, F.S.; conforming provisions to changes made by the act; amending s. 324.011, F.S.; revising legislative intent; amending s. 324.021, F.S.; revising definitions of the terms "motor vehicle" and "proof of

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financial responsibility"; revising, at specified timeframes, minimum coverage requirements for proof of financial responsibility for specified motor vehicles; defining the term "for-hire passenger transportation vehicle"; conforming provisions to changes made by the act; amending s. 324.022, F.S.; revising, at specified timeframes, minimum liability coverage requirements for motor vehicle owners or operators; revising authorized methods for meeting such requirements; revising the vehicles that are excluded from the definition of the term "motor vehicle" and providing security requirements for certain excluded vehicles; conforming provisions to changes made by the act; conforming cross-references; amending s. 324.0221, F.S.; revising applicability of certain insurer reporting and notice requirements as to policies providing certain liability coverages; conforming provisions to changes made by the act; amending s. 324.023, F.S.; conforming cross-references; amending s. 324.031, F.S.; revising applicability of a provision authorizing certain methods of proving financial responsibility; revising, at specified timeframes, the amount of a certificate of deposit required for a specified method of proof of financial responsibility; revising excess liability coverage requirements for a person electing to use such method; amending s. 324.032, F.S.; revising financial responsibility requirements for owners or lessees of for-hire passenger transportation vehicles and the

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applicability of such requirements; revising a requirement for a motor vehicle liability policy obtained to comply with such requirements; amending ss. 324.051, 324.071, 324.091, and 324.151, F.S.; making technical changes; amending s. 324.161, F.S.; revising requirements for a certificate of deposit that is required if a person elects a certain method of providing financial responsibility; amending s. 324.171, F.S.; revising, at specified timeframes, the minimum net worth requirements to qualify certain persons as self-insurers; conforming provisions to changes made by the act; amending s. 324.251, F.S.; revising the short title and an effective date; amending s. 400.9905, F.S.; revising the definition of the term "clinic" relating to reimbursements for health care services under motor vehicle insurance coverage; amending s. 400.991, F.S.; conforming a provision to changes made by the act; amending s. 400.9935, F.S.; revising a condition relating to certain clinic billings to apply to motor vehicle insurance carriers rather than to personal injury protection insurance carriers; amending s. 409.901, F.S.; revising the definition of the term "third-party benefit"; amending s. 409.910, F.S.; revising the definition of the term "medical coverage"; making technical changes; amending s. 456.057, F.S.; conforming a provision to changes made by the act; amending s. 456.072, F.S.; revising specified grounds for discipline for certain health professions relating

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to motor vehicle insurance claims rather than personal injury protection claims; defining the term "upcoded"; amending s. 626.9541, F.S.; conforming a provision to changes made by the act; revising the type of insurance coverage applicable to a certain prohibited act; conforming a cross-reference; amending s. 626.989, F.S.; revising the definition of the term "fraudulent insurance act" to include certain acts under a motor vehicle insurance policy rather than under the Florida Motor Vehicle No-Fault Law; amending s. 627.06501, F.S.; revising coverages that may provide for a reduction in motor vehicle insurance policy premium charges under certain circumstances; amending s. 627.0652, F.S.; revising coverages that must provide a premium charge reduction under certain circumstances; amending s. 627.0653, F.S.; revising coverages subject to premium discounts for specified motor vehicle equipment; amending s. 627.4132, F.S.; revising the coverages of a motor vehicle policy which are subject to a stacking prohibition; amending s. 627.7263, F.S.; revising provisions relating to the designation of primary insurance for rental and leasing driver's insurance; conforming provisions to changes made by the act; amending s. 627.727, F.S.; conforming provisions to changes made by the act; amending s. 627.7275, F.S.; revising applicability and required coverages for a motor vehicle insurance policy; requiring insureds or claimants, or their representatives, to provide insurers with a written

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notice of loss before bringing certain bad faith actions; providing that if an insurer complies with certain conditions, it does not violate a certain good faith duty and is not liable for a certain bad faith failure; requiring the trier of fact, in making certain evaluations, to consider whether the insurer or claimant made certain good faith efforts to cooperate with the insurer's investigation; providing a limitation on an insurer's liability relating to multiple third-party claimants under certain circumstances, if the insurer files an interpleader action within a specified timeframe; providing construction relating to the interpleader action; conforming provisions to changes made by the act; amending s. 627.728, F.S.; conforming a provision to changes made by the act; amending s. 627.7295, F.S.; revising the definitions of the terms "policy" and "binder"; revising the coverages of a motor vehicle insurance policy for which a licensed general lines agent may charge a specified fee; revising applicability; conforming a cross-reference; amending s. 627.7415, F.S.; revising, at specified intervals, the minimum levels of certain liability insurance required for commercial motor vehicles; amending s. 627.8405, F.S.; revising coverages in a policy sold in combination with an accidental death and dismemberment policy, which a premium finance company may not finance; revising rulemaking authority of the commission; amending ss. 627.915, 628.909, 705.184,

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and 713.78, F.S.; conforming provisions to changes made by the act; amending s. 817.234, F.S.; revising specified prohibited false and fraudulent insurance claims for benefits to those under a motor vehicle insurance policy rather than a personal injury protection insurance policy; conforming a provision to changes made by the act; conforming a cross-reference; providing applicability and construction relating to changes made by the act; defining the term "minimum security requirements"; providing requirements and procedures relating to motor vehicle insurance policies that include personal injury protection as of a specified date; requiring an insurer to provide, by a specified date, a specified notice to policyholders relating to requirements under the act; providing for construction relating to suspensions for failure to maintain required security in effect before a specified date; providing effective dates.

By the Committee on Banking and Insurance; and Senator Lee

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A bill to be entitled An act relating to motor vehicle insurance; repealing ss. 627.730, 627.731, 627.7311, 627.732, 627.733, 627.734, 627.736, 627.737, 627.739, 627.7401, 627.7403, and 627.7405, F.S., which comprise the Florida Motor Vehicle No-Fault Law; repealing s. 627.7407, F.S., relating to application of the Florida Motor Vehicle No-Fault Law; amending s. 316.646, F.S.; revising a requirement for proof of security on a motor vehicle and the applicability of the requirement; amending s. 318.18, F.S.; conforming a provision to changes made by the act; amending s. 320.02, F.S.; revising the motor vehicle insurance coverages that an applicant must show to register certain vehicles with the Department of Highway Safety and Motor Vehicles; deleting a requirement that specified information be included on a certain insurance proof-of-purchase card; revising construction; amending s. 320.0609, F.S.; conforming a provision to changes made by the act; amending s. 320.27, F.S.; defining the term "garage liability insurance"; revising garage liability insurance requirements for motor vehicle dealer applicants; conforming a provision to changes made by the act; amending s. 320.771, F.S.; revising garage liability insurance requirements for recreational vehicle dealer license applicants; amending ss. 322.251 and 322.34, F.S.; conforming provisions to changes made by the act; amending s. 324.011, F.S.; revising legislative

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30	intent; amending s. 324.021, F.S.; revising
31	definitions of the terms "motor vehicle" and "proof of
32	financial responsibility"; revising, at specified
33	timeframes, minimum coverage requirements for proof of
34	financial responsibility for specified motor vehicles;
35	defining the term "for-hire passenger transportation
36	vehicle"; conforming provisions to changes made by the
37	act; amending s. 324.022, F.S.; revising, at specified
38	timeframes, minimum liability coverage requirements
39	for motor vehicle owners or operators; revising
40	authorized methods for meeting such requirements;
41	revising the vehicles that are excluded from the
42	definition of the term "motor vehicle" and providing
43	security requirements for certain excluded vehicles;
44	conforming provisions to changes made by the act;
45	conforming cross-references; amending s. 324.0221,
46	F.S.; revising applicability of certain insurer
47	reporting and notice requirements as to policies
48	providing certain coverages; conforming provisions to
49	changes made by the act; amending s. 324.023, F.S.;
50	conforming cross-references; amending s. 324.031,
51	F.S.; revising applicability of a provision
52	authorizing certain methods of proving financial
53	responsibility; revising, at specified timeframes, the
54	amount of a certificate of deposit required for a
55	specified method of proof of financial responsibility;
56	revising excess liability coverage requirements for a
57	person electing to use such method; amending s.
58	324.032, F.S.; revising financial responsibility

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requirements for owners or lessees of for-hire passenger transportation vehicles and the applicability of such requirements; revising a requirement for a motor vehicle liability policy obtained to comply with such requirements; amending ss. 324.051, 324.071, 324.091, and 324.151, F.S.; making technical changes; amending s. 324.161, F.S.; revising requirements for a certificate of deposit that is required if a person elects a certain method of providing financial responsibility; amending s. 324.171, F.S.; revising, at specified timeframes, the minimum net worth requirements to qualify certain persons as self-insurers; conforming provisions to changes made by the act; amending s. 324.251, F.S.; revising the short title and an effective date; amending s. 400.9905, F.S.; revising the definition of the term "clinic"; amending ss. 400.991 and 400.9935, F.S.; conforming provisions to changes made by the act; amending s. 409.901, F.S.; revising the definition of the term "third-party benefit"; amending s. 409.910, F.S.; revising the definition of the term "medical coverage"; making technical changes; amending s. 456.057, F.S.; conforming a cross-reference; amending s. 456.072, F.S.; revising specified grounds for discipline for certain health professions; amending s. 626.9541, F.S.; conforming a provision to changes made by the act; revising the type of insurance coverage applicable to a certain prohibited act; conforming a cross-reference; amending s.

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88 626.989, F.S.; revising the definition of the term 89 "fraudulent insurance act"; amending s. 627.06501, 90 F.S.; revising coverages that may provide for a 91 reduction in motor vehicle insurance policy premium 92 charges under certain circumstances; amending s. 93 627.0652, F.S.; revising coverages that must provide a 94 premium charge reduction under certain circumstances; 95 amending s. 627.0653, F.S.; revising coverages subject 96 to premium discounts for specified motor vehicle 97 equipment; amending s. 627.4132, F.S.; revising the 98 coverages of a motor vehicle policy which are subject 99 to a stacking prohibition; amending s. 627.7263, F.S.; revising provisions relating to designation of primary 100 101 coverages for rental and leasing driver's insurance; 102 conforming provisions to changes made by the act; 103 creating s. 627.7265, F.S.; requiring specified motor 104 vehicle liability insurance policies to include 105 medical payments coverage; specifying persons such 106 coverage must protect; specifying the minimum medical 107 expense coverage and minimum death benefit required 108 under such coverage; providing construction relating 109 to limits on certain other coverages; prohibiting 110 insurers from offering such coverage to an applicant 111 or policyholder with a deductible; specifying medical 112 services and care required under such coverage; 113 authorizing insurers to exclude medical payment 114 benefits under certain circumstances; providing that 115 medical payments benefits are primary to certain 116 health insurance benefits and apply to the coinsurance

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or deductible amounts required by certain health insurance policies, except under certain circumstances; providing that a medical payments insurance policy, under certain circumstances, may include a subrogation provision for medical payments benefits paid; requiring insurers, upon receiving a certain notice, to hold a specified reserve for certain purposes for a specified time; providing that the reserve requirement does not require insurers to establish a claim reserve for accounting purposes; specifying requirements, procedures, limitations, and prohibitions relating to charges and billing for care of bodily injuries under medical payments coverage; defining the term "service year"; requiring the Department of Health to adopt a certain rule; providing insurers a civil cause of action against certain persons who are convicted of or plead guilty or nolo contendre to certain acts of insurance fraud associated with claims for medical payments coverage benefits; requiring insurers receiving notice of a claim to provide a specified fraud advisory notice to certain persons; providing that claims generated as a result of certain patient brokering activities are nonreimbursable; authorizing notices, documentation, transmissions, or communications to be transferred electronically in a secure manner; amending s. 627.727, F.S.; conforming provisions to changes made by the act; amending s. 627.7275, F.S.; revising applicability and required coverages for a motor

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146	vehicle insurance policy; conforming provisions to
147	changes made by the act; amending s. 627.728, F.S.;
148	conforming a provision to changes made by the act;
149	amending s. 627.7295, F.S.; revising the definitions
150	of the terms "policy" and "binder"; revising the
151	coverages of a motor vehicle insurance policy for
152	which a licensed general lines agent may charge a
153	specified fee; revising applicability; conforming a
154	cross-reference; amending s. 627.7415, F.S.; revising,
155	at specified intervals, the minimum levels of certain
156	liability insurance required for commercial motor
157	vehicles; amending s. 627.8405, F.S.; revising
158	coverages in a policy sold in combination with an
159	accidental death and dismemberment policy, which a
160	premium finance company may not finance; revising
161	rulemaking authority of the commission; amending ss.
162	627.915, 628.909, 705.184, and 713.78, F.S.;
163	conforming provisions to changes made by the act;
164	amending s. 817.234, F.S.; revising coverages that are
165	the basis of specified prohibited false and fraudulent
166	insurance claims; conforming a provision to changes
167	made by the act; conforming a cross-reference;
168	providing applicability and construction relating to
169	changes made by the act; defining the term "minimum
170	security requirements"; providing requirements and
171	procedures relating to motor vehicle insurance
172	policies that include personal injury protection as of
173	a specified date; requiring an insurer to provide, by
174	a specified date, a specified notice to policyholders

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175 relating to requirements under the act; providing for 176 construction relating to suspensions for failure to 177 maintain required security in effect before a 178 specified date; providing effective dates. 179 180 Be It Enacted by the Legislature of the State of Florida: 181 182 Section 1. Sections 627.730, 627.731, 627.7311, 627.732, 183 627.733, 627.734, 627.736, 627.737, 627.739, 627.7401, 627.7403, 184 and 627.7405, Florida Statutes, which comprise the Florida Motor 185 Vehicle No-Fault Law, are repealed. Section 2. Section 627.7407, Florida Statutes, is repealed. 186 Section 3. Subsection (1) of section 316.646, Florida 187 188 Statutes, is amended to read: 189 316.646 Security required; proof of security and display 190 thereof.-191 (1) Any person required by s. 324.022 to maintain liability 192 security for property damage, liability security, required by s. 193 324.023 to maintain liability security for bodily injury, or 194 death, or required by s. 627.733 to maintain personal injury 195 protection security on a motor vehicle shall have in his or her 196 immediate possession at all times while operating such motor 197 vehicle proper proof of maintenance of the required security 198 required under s. 324.021(7). 199 (a) Such proof must shall be in a uniform paper or 200 electronic format, as prescribed by the department, a valid 201 insurance policy, an insurance policy binder, a certificate of insurance, or such other proof as may be prescribed by the 202 203 department.

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204	(b) 1. The act of presenting to a law enforcement officer an
205	electronic device displaying proof of insurance in an electronic
206	format does not constitute consent for the officer to access any
207	information on the device other than the displayed proof of
208	insurance.
209	2. The person who presents the device to the officer
210	assumes the liability for any resulting damage to the device.
211	Section 4. Paragraph (b) of subsection (2) of section
212	318.18, Florida Statutes, is amended to read:
213	318.18 Amount of penalties.—The penalties required for a
214	noncriminal disposition pursuant to s. 318.14 or a criminal
215	offense listed in s. 318.17 are as follows:
216	(2) Thirty dollars for all nonmoving traffic violations
217	and:
218	(b) For all violations of ss. 320.0605, 320.07(1), 322.065,
219	and 322.15(1). \underline{A} Any person who is cited for a violation of s.
220	320.07(1) shall be charged a delinquent fee pursuant to s.
221	320.07(4).
222	1. If a person who is cited for a violation of s. 320.0605
223	or s. 320.07 can show proof of having a valid registration at
224	the time of arrest, the clerk of the court may dismiss the case
225	and may assess a dismissal fee of up to \$10. A person who finds
226	it impossible or impractical to obtain a valid registration
227	certificate must submit an affidavit detailing the reasons for
228	the impossibility or impracticality. The reasons may include,
229	but are not limited to, the fact that the vehicle was sold,
230	stolen, or destroyed; that the state in which the vehicle is
231	registered does not issue a certificate of registration; or that

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the vehicle is owned by another person.

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

2.57

3. If a person who is cited for a violation of s. 316.646 can show proof of security as required by s. 324.021(7) s. 627.733, issued to the person and valid at the time of arrest, the clerk of the court may dismiss the case and may assess a dismissal fee of up to \$10. A person who finds it impossible or impractical to obtain proof of security must submit an affidavit detailing the reasons for the impracticality. The reasons may include, but are not limited to, the fact that the vehicle has since been sold, stolen, or destroyed; that the owner or registrant of the vehicle is not required by s. 627.733 to maintain personal injury protection insurance; or that the vehicle is owned by another person.

Section 5. Paragraphs (a) and (d) of subsection (5) of section 320.02, Florida Statutes, are amended to read:

320.02 Registration required; application for registration; forms.—

(5) (a) Proof that <u>bodily injury liability coverage and</u> property damage <u>liability coverage personal injury protection</u> benefits have been purchased if required under <u>s. 324.022</u>, <u>s. 324.032</u>, or <u>s. 627.742</u>, that medical payments coverage has been

purchased if required under s. 627.7265 s. 627.733, that property damage liability coverage has been purchased as required under s. 324.022, that bodily injury <u>liability</u> or death coverage has been purchased if required under s. 324.023, and

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262	that combined bodily liability insurance and property damage
263	liability insurance have been purchased if required under s.
264	627.7415 $\underline{\text{must}}$ shall be provided in the manner prescribed by law
265	by the applicant at the time of application for registration of
266	any motor vehicle that is subject to such requirements. The
267	issuing agent $\underline{\text{may not}}$ $\underline{\text{shall refuse to}}$ issue registration if such
268	proof of purchase is not provided. Insurers shall furnish
269	uniform proof-of-purchase cards in a paper or electronic format
270	in a form prescribed by the department and include the name of
271	the insured's insurance company, the coverage identification
272	number, and the make, year, and vehicle identification number of
273	the vehicle insured. The card must contain a statement notifying
274	the applicant of the penalty specified under s. $316.646(4)$. The
275	card or insurance policy, insurance policy binder, or
276	certificate of insurance or a photocopy of any of these; an
277	affidavit containing the name of the insured's insurance
278	company, the insured's policy number, and the make and year of
279	the vehicle insured; or such other proof as may be prescribed by
280	the department constitutes shall constitute sufficient proof of
281	purchase. If an affidavit is provided as proof, it must be in
282	substantially the following form:
283	
284	Under penalty of perjury, I(Name of insured) do hereby
285	certify that I have(bodily injury liability and Personal
286	Injury Protection, property damage liability coverage, and
287	medical payments coverage, and, if required, Bodily Injury
288	$\frac{Liability}{})\dots$
289	insurance company) under(policy number) covering
290	(make, year, and vehicle identification number of

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vehicle) (Signature of Insured) ...

 Such affidavit must include the following warning:

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

If an application is made through a licensed motor vehicle dealer as required under s. 319.23, the original or a photocopy photostatic copy of such card, insurance policy, insurance policy binder, or certificate of insurance or the original affidavit from the insured must shall be forwarded by the dealer to the tax collector of the county or the Department of Highway Safety and Motor Vehicles for processing. By executing the aforesaid affidavit, a no licensed motor vehicle dealer is not will be liable in damages for any inadequacy, insufficiency, or falsification of any statement contained therein. A card must also indicate the existence of any bodily injury liability insurance voluntarily purchased.

(d) The verifying of proof of personal injury protection insurance, proof of property damage liability insurance, proof of combined bodily liability insurance and property damage liability insurance, or proof of financial responsibility insurance and the issuance or failure to issue the motor vehicle registration under the provisions of this chapter may not be construed in any court as a warranty of the reliability or accuracy of the evidence of such proof, or that the provisions

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320	of any insurance policy furnished as proof of financial
321	$\underline{\text{responsibility comply with state law}}. \ \underline{\text{Neither}} \ \text{The department } \underline{\text{or}}$
322	$\frac{1}{1}$ any tax collector is $\frac{1}{1}$ liable in damages for any
323	inadequacy, insufficiency, falsification, or unauthorized
324	modification of any item of the proof of personal injury
325	protection insurance, proof of property damage liability
326	insurance, proof of combined bodily liability insurance and
327	property damage liability insurance, or proof of financial
328	responsibility $\underline{\text{before}}$ $\underline{\text{insurance prior to}}$, during, or subsequent
329	to the verification of the proof. The issuance of a motor
330	vehicle registration does not constitute prima facie evidence or
331	a presumption of insurance coverage.
332	Section 6. Paragraph (b) of subsection (1) of section
333	320.0609, Florida Statutes, is amended to read:
334	320.0609 Transfer and exchange of registration license
335	plates; transfer fee
336	(1)
337	(b) The transfer of a license plate from a vehicle disposed
338	of to a newly acquired vehicle does not constitute a new
339	registration. The application for transfer shall be accepted
340	without requiring proof of personal injury protection or
341	liability insurance.
342	Section 7. Paragraph (g) is added to subsection (1) of
343	section 320.27, Florida Statutes, and subsection (3) of that
344	section is amended, to read:
345	320.27 Motor vehicle dealers
346	(1) DEFINITIONS.—The following words, terms, and phrases
347	when used in this section have the meanings respectively
348	ascribed to them in this subsection, except where the context

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clearly indicates a different meaning:

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- (g) "Garage liability insurance" means combined singlelimit liability coverage, including property damage and bodily injury liability coverage, in the amount of:
- 1. Beginning January 1, 2019, and continuing through December 31, 2020, at least \$50,000.
- 2. Beginning January 1, 2021, and continuing through December 31, 2022, at least \$60,000.
- $\underline{\mbox{3. Beginning January 1, 2023 and thereafter, at least}}\ \mbox{\$70,000.}$
- (3) APPLICATION AND FEE.-The application for the license application must shall be in such form as may be prescribed by the department and is shall be subject to such rules with respect thereto as may be so prescribed by the department it. Such application must shall be verified by oath or affirmation and must shall contain a full statement of the name and birth date of the person or persons applying for the license therefor; the name of the firm or copartnership, with the names and places of residence of all members thereof, if such applicant is a firm or copartnership; the names and places of residence of the principal officers, if the applicant is a body corporate or other artificial body; the name of the state under whose laws the corporation is organized; the present and former place or places of residence of the applicant; and the prior business in which the applicant has been engaged and its the location thereof. The Such application must shall describe the exact location of the place of business and must $\frac{1}{2}$ state whether the place of business is owned by the applicant and when acquired, or, if leased, a true copy of the lease must shall be

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597-01963-18 2018150c1 378 attached to the application. The applicant shall certify that 379 the location provides an adequately equipped office and is not a 380 residence; that the location affords sufficient unoccupied space upon and within which adequately to store all motor vehicles 382 offered and displayed for sale; and that the location is a 383 suitable place where the applicant can in good faith carry on such business and keep and maintain books, records, and files 385 necessary to conduct such business, which must shall be 386 available at all reasonable hours to inspection by the 387 department or any of its inspectors or other employees. The applicant shall certify that the business of a motor vehicle 389 dealer is the principal business that will which shall be 390 conducted at that location. The application must shall contain a 391 statement that the applicant is either franchised by a 392 manufacturer of motor vehicles, in which case the name of each 393 motor vehicle that the applicant is franchised to sell must shall be included, or an independent (nonfranchised) motor 394 395 vehicle dealer. The application must shall contain other 396 relevant information as may be required by the department. The 397 applicant must furnish, including evidence, in a form approved 398 by the department, that the applicant is insured under a garage 399 liability insurance policy or a general liability insurance 400 policy coupled with a business automobile policy having the 401 garage liability insurance coverage required by this subsection, 402 which shall include, at a minimum, \$25,000 combined single-limit 403 liability coverage including bodily injury and property damage 404 protection and \$10,000 personal injury protection. However, a 405 salvage motor vehicle dealer as defined in subparagraph (1)(c)5. is exempt from the requirements for garage liability insurance 406

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597-01963-18 2018150c1 407 and medical payments coverage insurance and personal injury 408 protection insurance on those vehicles that cannot be legally 409 operated on roads, highways, or streets in this state. Franchise 410 dealers must submit a garage liability insurance policy, and all 411 other dealers must submit a garage liability insurance policy or 412 a general liability insurance policy coupled with a business 413 automobile policy. Such policy must shall be for the license 414 period, and evidence of a new or continued policy must shall be 415 delivered to the department at the beginning of each license 416 period. Upon making an initial application, the applicant shall 417 pay to the department a fee of \$300 in addition to any other 418 fees required by law. Applicants may choose to extend the licensure period for 1 additional year for a total of 2 years. 419 420 An initial applicant shall pay to the department a fee of \$300 421 for the first year and \$75 for the second year, in addition to 422 any other fees required by law. An applicant for renewal shall 423 pay to the department \$75 for a 1-year renewal or \$150 for a 2-424 year renewal, in addition to any other fees required by law. 425 Upon making an application for a change of location, the 426 applicant person shall pay a fee of \$50 in addition to any other 427 fees now required by law. The department shall, in the case of 428 every application for initial licensure, verify whether certain 429 facts set forth in the application are true. Each applicant, 430 general partner in the case of a partnership, or corporate 431 officer and director in the case of a corporate applicant shall, 432 must file a set of fingerprints with the department for the 433 purpose of determining any prior criminal record or any 434 outstanding warrants. The department shall submit the fingerprints to the Department of Law Enforcement for state

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36	processing and forwarding to the Federal Bureau of Investigation
37	for federal processing. The actual cost of state and federal
38	processing $\underline{\text{must}}$ $\underline{\text{shall}}$ be borne by the applicant and is in
39	addition to the fee for licensure. The department may issue a
40	license to an applicant pending the results of the fingerprint
41	investigation, which license is fully revocable if the
42	department subsequently determines that any facts set forth in
43	the application are not true or correctly represented.
44	Section 8. Paragraph (j) of subsection (3) of section
45	320.771, Florida Statutes, is amended to read:
46	320.771 License required of recreational vehicle dealers.—
47	(3) APPLICATION.—The application for such license shall be
48	in the form prescribed by the department and subject to such
49	rules as may be prescribed by it. The application shall be
50	verified by oath or affirmation and shall contain:
51	(j) A statement that the applicant is insured under a
52	garage liability insurance policy $\underline{\text{in accordance with s.}}$
53	320.27(1)(g), which shall include, at a minimum, \$25,000
54	combined single-limit liability coverage, including bodily
55	injury and property damage protection, and \$10,000 personal
56	$\frac{\text{injury protection}_{r}}{\text{or}}$ if the applicant is to be licensed as a
57	dealer in, or intends to sell, recreational vehicles.
58	
59	The department shall, if it deems necessary, cause an
60	investigation to be made to ascertain if the facts set forth in
61	the application are true and shall not issue a license to the
62	applicant until it is satisfied that the facts set forth in the
63	application are true.

Section 9. Subsections (1) and (2) of section 322.251,

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Florida Statutes, are amended to read:

- 322.251 Notice of cancellation, suspension, revocation, or disqualification of license.—
- (1) All orders of cancellation, suspension, revocation, or disqualification issued under the provisions of this chapter, chapter 318, or chapter 324 must, or ss. 627.732-627.734 shall be given either by personal delivery thereof to the licensee whose license is being canceled, suspended, revoked, or disqualified or by deposit in the United States mail in an envelope, first class, postage prepaid, addressed to the licensee at his or her last known mailing address furnished to the department. Such mailing by the department constitutes notification, and any failure by the person to receive the mailed order will not affect or stay the effective date or term of the cancellation, suspension, revocation, or disqualification of the licensee's driving privilege.
- (2) The giving of notice and an order of cancellation, suspension, revocation, or disqualification by mail is complete upon expiration of 20 days after deposit in the United States mail for all notices except those issued under chapter 324 erss. 627.732-627.734, which are complete 15 days after deposit in the United States mail. Proof of the giving of notice and an order of cancellation, suspension, revocation, or disqualification in either manner must shall be made by entry in the records of the department that such notice was given. The entry is admissible in the courts of this state and constitutes sufficient proof that such notice was given.
- Section 10. Paragraph (a) of subsection (8) of section 322.34, Florida Statutes, is amended to read:

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

- (8) (a) Upon the arrest of a person for the offense of driving while the person's driver license or driving privilege is suspended or revoked, the arresting officer shall determine:
- 1. Whether the person's driver license is suspended or revoked.
- 2. Whether the person's driver license has remained suspended or revoked since a conviction for the offense of driving with a suspended or revoked license.
- 3. Whether the suspension or revocation was made under s. 316.646 or s. 627.733, relating to failure to maintain required security, or under s. 322.264, relating to habitual traffic offenders.
- 4. Whether the driver is the registered owner or coowner of the vehicle.

Section 11. Section 324.011, Florida Statutes, is amended to read:

324.011 Legislative intent and purpose of chapter.—It is the Legislature's intent of this chapter to ensure that the privilege of owning or operating a motor vehicle in this state be exercised recognize the existing privilege to own or operate a motor vehicle on the public streets and highways of this state when such vehicles are used with due consideration for others' safety others and their property, and to promote safety, and to provide financial security requirements for such owners and or operators whose responsibility it is to recompense others for injury to person or property caused by the operation of a motor vehicle. Therefore, this chapter requires that every owner or

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operator of a motor vehicle required to be registered in this state establish, maintain, and it is required herein that the operator of a motor vehicle involved in a crash or convicted of certain traffic offenses meeting the operative provisions of s. 324.051(2) shall respond for such damages and show proof of financial ability to respond for damages arising out of the ownership, maintenance, or use of a motor vehicle in future accidents as a requisite to owning or operating a motor vehicle in this state his or her future exercise of such privileges.

Section 12. Subsections (1) and (7) and paragraph (c) of subsection (9) of section 324.021, Florida Statutes, are amended, and subsection (12) is added to that section, to read:

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

(1) MOTOR VEHICLE.—Every self-propelled vehicle that is designed and required to be licensed for use upon a highway, including trailers and semitrailers designed for use with such vehicles, except traction engines, road rollers, farm tractors, power shovels, and well drillers, and every vehicle that is propelled by electric power obtained from overhead wires but not operated upon rails, but not including any personal delivery device as defined in s. 316.003, bicycle, or moped. However, the term "motor vehicle" does not include a motor vehicle as defined in s. 627.732(3) when the owner of such vehicle has complied with the requirements of ss. 627.730 627.7405, inclusive, unless the provisions of s. 324.051 apply; and, in such case, the

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552	applicable proof of insurance provisions of s. 320.02 apply.
553	(7) PROOF OF FINANCIAL RESPONSIBILITY.—That Proof of
554	ability to respond in damages for liability on account of
555	crashes arising out of the $\underline{\text{ownership, maintenance, or}}$ use of a
556	motor vehicle:
557	(a) With respect to a motor vehicle that is not a
558	commercial motor vehicle, nonpublic sector bus, or for-hire
559	<pre>passenger transportation vehicle:</pre>
560	1. Beginning January 1, 2019, and continuing through
561	December 31, 2020, in the amount of:
562	a. Twenty thousand dollars for \$10,000 because of bodily
563	injury to, or $\underline{\text{the}}$ death of, one person in any one crash $\underline{\text{and}}_{,\dot{\tau}}$
564	(b) subject to such limits for one person, in the amount of
565	$\$40,000$ for $\$20,000$ because of bodily injury to, or $\underline{\text{the}}$ death
566	of, two or more persons in any one crash; $\underline{\text{and}}$
567	b. Ten thousand dollars for damage to, or destruction of,
568	property of others in any one crash.
569	2. Beginning January 1, 2021, and continuing through
570	December 31, 2022, in the amount of:
571	a. Twenty-five thousand dollars for bodily injury to, or
572	the death of, one person in any one crash and, subject to such
573	limits for one person, in the amount of \$50,000 for bodily
574	injury to, or the death of, two or more persons in any one
575	crash; and
576	b. Ten thousand dollars for damage to, or destruction of,
577	property of others in any one crash.
578	3. Beginning January 1, 2023, and continuing thereafter, in
579	the amount of:
580	a. Thirty thousand dollars for bodily injury to, or the

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death of, one person in any one crash and, subject to such limits for one person, in the amount of \$60,000 for bodily injury to, or the death of, two or more persons in any one crash; and

- b.(e) Ten thousand dollars for damage The the amount of \$10,000 because of injury to, or destruction of, property of others in any one crash.; and
- (c) With respect to nonpublic sector buses, in the amounts specified in s. 627.742.
- (d) With respect to for-hire passenger transportation vehicles, in the amounts specified in s. 324.032.
 - (9) OWNER; OWNER/LESSOR.-
 - (c) Application.-

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

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a. A related rental or leasing company that is a subsidiary

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of the same parent company as that of the renting or leasing company that rented or leased the vehicle.

- b. The holder of a motor vehicle title or an equity interest in a motor vehicle title if the title or equity interest is held pursuant to or to facilitate an asset-backed securitization of a fleet of motor vehicles used solely in the business of renting or leasing motor vehicles to the general public and under the dominion and control of a rental company, as described in this subparagraph, in the operation of such rental company's business.
- 2. Furthermore, with respect to commercial motor vehicles as defined in $\underline{s.~207.002}$ or $\underline{s.~320.01}$ $\underline{s.~627.732}$, the limits on liability in subparagraphs (b)2. and 3. do not apply if, at the time of the incident, the commercial motor vehicle is being used in the transportation of materials found to be hazardous for the purposes of the Hazardous Materials Transportation Authorization Act of 1994, as amended, 49 U.S.C. ss. 5101 et seq., and that is required pursuant to such act to carry placards warning others of the hazardous cargo, unless at the time of lease or rental either:
- a. The lessee indicates in writing that the vehicle will not be used to transport materials found to be hazardous for the purposes of the Hazardous Materials Transportation Authorization Act of 1994, as amended, 49 U.S.C. ss. 5101 et seq.; or
- b. The lessee or other operator of the commercial motor vehicle has in effect insurance with limits of at least \$5 million \$5,000,000 combined property damage and bodily injury liability.
 - (12) FOR-HIRE PASSENGER TRANSPORTATION VEHICLE.-Every "for-

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639	hire vehicle" as defined in s. 320.01(15) which is offered or
640	used to provide transportation for persons, including taxicabs,
641	limousines, and jitneys.
642	Section 13. Section 324.022, Florida Statutes, is amended
643	to read:
644	324.022 Financial responsibility requirements for property
645	damage
646	(1) (a) Every owner or operator of a motor vehicle required
647	to be registered in this state shall establish and continuously
648	maintain the ability to respond in damages for liability on
649	account of accidents arising out of the use of the motor vehicl
650	in the amount of:
651	1. Beginning January 1, 2019, and continuing through
652	December 31, 2020:
653	a. Twenty thousand dollars for bodily injury to, or the
654	death of, one person in any one crash and, subject to such
655	limits for one person, in the amount of \$40,000 for bodily
656	injury to, or the death of, two or more persons in any one
657	crash; and
658	b. Ten thousand dollars for damage to, or destruction of,
659	property of others in any one crash.
660	2. Beginning January 1, 2021, and continuing through
661	<u>December 31, 2022:</u>
662	a. Twenty-five thousand dollars for bodily injury to, or
663	the death of, one person in any one crash and, subject to such
664	limits for one person, in the amount of \$50,000 for bodily
665	injury to, or the death of, two or more persons in any one
666	crash; and
667	b. Ten thousand dollars for damage to, or destruction of,

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668	property of others in any one crash.
669	3. Beginning January 1, 2023, and continuing thereafter:
670	a. Thirty thousand dollars for bodily injury to, or the
671	death of, one person in any one crash and, subject to such
672	limits for one person, in the amount of \$60,000 for bodily
673	injury to, or the death of, two or more persons in any one
674	crash; and
675	b. Ten thousand dollars for \$10,000 because of damage to,
676	or destruction of, property of others in any one crash.
677	(b) The requirements of paragraph (a) this section may be
678	met by one of the methods established in s. 324.031; by self-
679	insuring as authorized by s. 768.28(16); or by maintaining
680	medical payments coverage under s. 627.7265 and a motor vehicle
681	liability insurance policy that an insurance policy providing
682	coverage for property damage liability in the amount of at least
683	\$10,000 because of damage to, or destruction of, property of
684	others in any one accident arising out of the use of the motor
685	vehicle. The requirements of this section may also be met by
686	having a policy which provides combined property damage
687	$\underline{\text{liability}}$ and bodily injury liability coverage $\underline{\text{for any one crash}}$
688	arising out of the ownership, maintenance, or use of a motor
689	$\underline{\text{vehicle}}$ which conforms to the requirements of s. 324.151 in the
690	amount of:
691	1. At least \$50,000 for every owner or operator subject to
692	the financial responsibility required in subparagraph (1)(a)1.
693	2. At least \$60,000 for every owner or operator subject to
694	the financial responsibility required in subparagraph (1)(a)2.
695	3. At least \$70,000 for every owner or operator subject to
696	the financial responsibility required in subparagraph (1)(a)3.

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\$30,000 for combined property damage liability and bodily injury liability for any one crash arising out of the use of the motor vehicle. The policy, with respect to coverage for property damage liability, must meet the applicable requirements of s.

324.151, subject to the usual policy exclusions that have been approved in policy forms by the Office of Insurance Regulation.

No insurer shall have any duty to defend uncovered claims

irrespective of their joinder with covered claims.

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

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- (a) "Motor vehicle" means any self-propelled vehicle that has four or more wheels and that is of a type designed and required to be licensed for use on the highways of this state, and any trailer or semitrailer designed for use with such vehicle. The term does not include the following:
 - 1. A mobile home as defined in s. 320.01.
- 2. A motor vehicle that is used in mass transit and designed to transport more than five passengers, exclusive of the operator of the motor vehicle, and that is owned by a municipality, transit authority, or political subdivision of the state.
- 3. A school bus as defined in s. 1006.25, which shall maintain security as required under s. 316.615.
- 4. A commercial motor vehicle as defined in s. 207.002 or s. 320.01, which shall maintain security as required under ss. 324.031 and 627.7415.
- 5. A nonpublic sector bus, which shall maintain security as required under ss. 324.031 and 627.742.
- 6.4. A vehicle providing for-hire passenger transportation vehicle, which that is subject to the provisions of s. 324.031.

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A taxicab shall maintain security as required under <u>s. 324.032</u> $\frac{1}{2}$ s. $\frac{324.032(1)}{2}$.

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- 7.5. A personal delivery device as defined in s. 316.003.
- (b) "Owner" means the person who holds legal title to a motor vehicle or the debtor or lessee who has the right to possession of a motor vehicle that is the subject of a security agreement or lease with an option to purchase.
- (3) Each nonresident owner or registrant of a motor vehicle that, whether operated or not, has been physically present within this state for more than 90 days during the preceding 365 days shall maintain security as required by subsection (1). The security must be that is in effect continuously throughout the period the motor vehicle remains within this state.
- (4) An The owner or registrant of a motor vehicle who is exempt from the requirements of this section if she or he is a member of the United States Armed Forces and is called to or on active duty outside the United States in an emergency situation is exempt from this section while he or she. The exemption provided by this subsection applies only as long as the member of the Armed Forces is on such active duty. This exemption outside the United States and applies only while the vehicle covered by the security is not operated by any person. Upon receipt of a written request by the insured to whom the exemption provided in this subsection applies, the insurer shall cancel the coverages and return any unearned premium or suspend the security required by this section. Notwithstanding s. 324.0221(2) s. 324.0221(3), the department may not suspend the registration or operator's license of an any owner or registrant of a motor vehicle during the time she or he qualifies for the

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an exemption under this subsection. An Any owner or registrant of a motor vehicle who qualifies for $\underline{\text{the}}$ an exemption under this subsection shall immediately notify the department $\underline{\text{before}}$ $\underline{\text{prior}}$ to and at the end of the expiration of the exemption.

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Section 14. Subsections (1) and (2) of section 324.0221, Florida Statutes, are amended to read:

324.0221 Reports by insurers to the department; suspension of driver license and vehicle registrations; reinstatement.—

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

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

- (2) The department shall suspend, after due notice and an opportunity to be heard, the registration and driver license of any owner or registrant of a motor vehicle for with respect to which security is required under s. 324.022, s. 324.032, s. 627.7415, or s. 627.742 ss. 324.022 and 627.733 upon:
- (a) The department's records showing that the owner or registrant of such motor vehicle did not have the in full force and effect when required security in full force and effect that complies with the requirements of ss. 324.022 and 627.733; or
- (b) Notification by the insurer to the department, in a form approved by the department, of cancellation or termination of the required security.

Section 15. Section 324.023, Florida Statutes, is amended to read:

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324.023 Financial responsibility for bodily injury or death.-In addition to any other financial responsibility required by law, every owner or operator of a motor vehicle that is required to be registered in this state, or that is located within this state, and who, regardless of adjudication of guilt, has been found guilty of or entered a plea of guilty or nolo contendere to a charge of driving under the influence under s. 316.193 after October 1, 2007, shall, by one of the methods established in s. 324.031(1) (a) or (b) s. 324.031(1) or (2), establish and maintain the ability to respond in damages for liability on account of accidents arising out of the use of a motor vehicle in the amount of \$100,000 because of bodily injury to, or death of, one person in any one crash and, subject to such limits for one person, in the amount of \$300,000 because of bodily injury to, or death of, two or more persons in any one crash and in the amount of \$50,000 because of property damage in any one crash. If the owner or operator chooses to establish and maintain such ability by furnishing a certificate of deposit pursuant to s. 324.031(1) (b) s. 324.031(2), such certificate of deposit must be at least \$350,000. Such higher limits must be carried for a minimum period of 3 years. If the owner or operator has not been convicted of driving under the influence or a felony traffic offense for a period of 3 years from the date of reinstatement of driving privileges for a violation of s. 316.193, the owner or operator shall be exempt from this section. Section 16. Section 324.031, Florida Statutes, is amended

Section 16. Section 324.031, Florida Statutes, is amended to read:

324.031 Manner of proving financial responsibility.-

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42	(1) The owner or operator of a taxicab, limousine, jitney,
43	or any other for-hire passenger transportation vehicle may prove
44	financial responsibility by providing satisfactory evidence of
45	holding a motor vehicle liability policy as defined in s.
46	324.021(8) or s. 324.151, which policy is issued by an insurance
47	carrier which is a member of the Florida Insurance Guaranty
48	Association. The operator or owner of \underline{a} motor vehicle other than
49	a for-hire passenger transportation vehicle any other vehicle
50	may prove his or her financial responsibility by:
51	(a) (1) Furnishing satisfactory evidence of holding a motor
52	vehicle liability policy as defined in ss. 324.021(8) and
53	324.151;
54	$\underline{\text{(b)}}$ (2) Furnishing a certificate of self-insurance showing a
55	deposit of cash in accordance with s. 324.161; or
56	$\underline{\text{(c)}}$ (3) Furnishing a certificate of self-insurance issued by
57	the department in accordance with s. 324.171.
58	(2) (a) Any person, including any firm, partnership,
59	association, corporation, or other person, other than a natural
60	$\frac{person_{7}}{person_{7}}$ electing to use the method of proof specified in
61	<pre>paragraph (1)(b) subsection (2) shall furnish a certificate of</pre>
62	deposit equal to the number of vehicles owned times $\underline{:}$
63	1. Fifty thousand dollars, to a maximum of \$200,000, from
64	January 1, 2019, through December 31, 2020.
65	2. Sixty thousand dollars, to a maximum of \$240,000, from
66	January 1, 2021, through December 31, 2022.
67	3. Seventy thousand dollars, $\$30,000$, to a maximum of
68	\$280,000, from January 1, 2023, and thereafter. \$120,000;
69	(b) In addition, any such person, other than a natural
70	person, shall maintain insurance providing coverage conforming

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to the requirements of s. 324.151 in excess of the amount of the certificate of deposit, with limits of at least:

- 1. One hundred twenty-five thousand dollars for bodily injury to, or the death of, one person in any one crash and, subject to such limits for one person, in the amount of \$250,000 for bodily injury to, or the death of, two or more persons in any one crash, and \$50,000 for damage to, or destruction of, property of others in any one crash; or \$10,000/20,000/10,000 or \$30,000 combined single limits, and such excess insurance shall provide minimum limits of \$125,000/250,000/50,000 or \$300,000 combined single limits. These increased limits shall not affect the requirements for proving financial responsibility under s. 324.032(1).
- 2. Three hundred thousand dollars for combined bodily injury liability and property damage liability for any one crash.

Section 17. Section 324.032, Florida Statutes, is amended to read:

324.032 Manner of proving Financial responsibility $\underline{\text{for}}$; for-hire passenger transportation vehicles.—Notwithstanding the provisions of s. 324.031:

- (1) An owner or lessee of a for-hire passenger transportation vehicle that is required to be registered in this state shall establish and continuously maintain the ability to respond in damages for liability on account of accidents arising out of the ownership, maintenance, or use of the for-hire passenger transportation vehicle, in the amount of:
- (a) One hundred twenty-five thousand dollars for bodily injury to, or the death of, one person in any one crash and,

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subject to such limits for one person, in the amount of \$250,000
subject to such limits for one person, in the amount of \$250,000
for bodily injury to, or the death of, two or more persons in
any one crash; and A person who is either the owner or a lessee
required to maintain insurance under s. 627.733(1)(b) and who
operates one or more taxicabs, limousines, jitneys, or any other
for-hire passenger transportation vehicles may prove financial
responsibility by furnishing satisfactory evidence of holding a
motor vehicle liability policy, but with minimum limits of
\$125,000/250,000/50,000.

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- (b) Fifty thousand dollars for damage to, or destruction of, property of others in any one crash A person who is either the owner or a lessee required to maintain insurance under s. 324.021(9) (b) and who operates limousines, jitneys, or any other for-hire passenger vehicles, other than taxicabs, may prove financial responsibility by furnishing satisfactory evidence of holding a motor vehicle liability policy as defined in s. 324.031.
- (2) Except as provided in subsection (3), the requirements of this section must be met by the owner or lessee providing satisfactory evidence of holding a motor vehicle liability policy conforming to the requirements of s. 324.151 which is issued by an insurance carrier that is a member of the Florida Insurance Guaranty Association.
- (3)(2) An owner or a lessee who is required to maintain insurance under s. 324.021(9)(b) and who operates at least 300 taxicabs, limousines, jitneys, or any other for-hire passenger transportation vehicles may provide financial responsibility by complying with the provisions of s. 324.171, such compliance to be demonstrated by maintaining at its principal place of

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business an audited financial statement, prepared in accordance with generally accepted accounting principles, and providing to the department a certification issued by a certified public accountant that the applicant's net worth is at least equal to the requirements of s. 324.171 as determined by the Office of Insurance Regulation of the Financial Services Commission, including claims liabilities in an amount certified as adequate by a Fellow of the Casualty Actuarial Society.

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Upon request by the department, the applicant shall must provide the department at the applicant's principal place of business in this state access to the applicant's underlying financial information and financial statements that provide the basis of the certified public accountant's certification. The applicant shall reimburse the requesting department for all reasonable costs incurred by it in reviewing the supporting information. The maximum amount of self-insurance permissible under this subsection is \$300,000 and must be stated on a per-occurrence basis, and the applicant shall maintain adequate excess insurance issued by an authorized or eligible insurer licensed or approved by the Office of Insurance Regulation. All risks self-insured shall remain with the owner or lessee providing it, and the risks are not transferable to any other person, unless a policy complying with subsections (1) and (2) subsection (1) is obtained.

Section 18. Paragraph (b) of subsection (2) of section 324.051, Florida Statutes, is amended to read:

324.051 Reports of crashes; suspensions of licenses and registrations.—

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(2)
(b) This subsection <u>does</u> shall not apply:
1. To such operator or owner if such operator or owner had
in effect at the time of such crash or traffic conviction \underline{a}
${\color{red}\underline{\text{motor vehicle}}}$ an automobile liability policy with respect to all
of the registered motor vehicles owned by such operator or
owner.
2. To such operator, if not the owner of such motor
vehicle, if there was in effect at the time of such crash or
traffic conviction $\underline{a\ motor\ vehicle}\ \underline{an\ automobile}$ liability
policy or bond with respect to his or her operation of motor
vehicles not owned by him or her.
3. To such operator or owner if the liability of such
operator or owner for damages resulting from such crash is, in
the judgment of the department, covered by any other form of
liability insurance or bond.
4. To any person who has obtained from the department a
certificate of self-insurance, in accordance with s. 324.171, or
to any person operating a motor vehicle for such self-insurer.
No such policy or bond shall be effective under this subsection
unless it contains limits of not less than those specified in s.
324.021(7).
Section 19. Section 324.071, Florida Statutes, is amended
to read:

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324.071 Reinstatement; renewal of license; reinstatement

fee.—An Any operator or owner whose license or registration has

been suspended pursuant to s. 324.051(2), s. 324.072, s. 324.081, or s. 324.121 may effect its reinstatement upon

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s. 324.081(2) and (3), as the case may be, and with one of the provisions of s. 324.031 and upon payment to the department of a nonrefundable reinstatement fee of \$15. Only one such fee may shall be paid by any one person regardless irrespective of the number of licenses and registrations to be then reinstated or issued to such person. All Such fees must shall be deposited to a department trust fund. If When the reinstatement of any license or registration is effected by compliance with s. 324.051(2)(a)3. or 4., the department may shall not renew the license or registration within a period of 3 years after from such reinstatement, nor may shall any other license or registration be issued in the name of such person, unless the operator continues is continuing to comply with one of the provisions of s. 324.031.

Section 20. Subsection (1) of section 324.091, Florida Statutes, is amended to read:

324.091 Notice to department; notice to insurer.-

(1) Each owner and operator involved in a crash or conviction case within the purview of this chapter shall furnish evidence of automobile liability insurance or motor vehicle liability insurance within 14 days after the date of the mailing of notice of crash by the department in the form and manner as it may designate. Upon receipt of evidence that a an automobile liability policy or motor vehicle liability policy was in effect at the time of the crash or conviction case, the department shall forward to the insurer such information for verification in a method as determined by the department. The insurer shall respond to the department within 20 days after the notice as to

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1016	whether or not such information is valid. If the department
1017	determines that \underline{a} an automobile liability policy or motor
1018	vehicle liability policy was not in effect and did not provide
1019	coverage for both the owner and the operator, it $\underline{\text{must}} \ \underline{\text{shall}} \ \text{take}$
1020	action as it is authorized to do under this chapter.
1021	Section 21. Section 324.151, Florida Statutes, is amended
1022	to read:
1023	324.151 Motor vehicle liability policies; required
1024	provisions
1025	(1) A motor vehicle liability policy that serves as $\frac{1}{2}$ to be
1026	proof of financial responsibility under s. 324.031(1) $\underline{\text{must}}_{r}$
1027	$\underline{\text{shall}}$ be issued to owners or operators $\underline{\text{of motor vehicles}}$ under
1028	the following provisions:
1029	(a) A motor vehicle An owner's liability insurance policy
1030	issued to an owner of a motor vehicle registered in this state
1031	$\underline{\text{must}}$ shall designate by explicit description or by appropriate
1032	reference all motor vehicles $\underline{\text{for}}$ with respect to which coverage
1033	is thereby granted. The policy must and shall insure the \underline{person}
1034	or persons owner named therein and any other person as operator
1035	using such motor vehicle or motor vehicles with the express or
1036	implied permission of such owner against loss from the liability
1037	imposed by law for damage arising out of the ownership,
1038	maintenance, or use of $\underline{\text{any}}$ such motor vehicle or motor vehicles
1039	within the United States or the Dominion of Canada, subject to
1040	limits, exclusive of interest and costs with respect to each
1041	such motor vehicle as is provided for under s. 324.021(7).
1042	Insurers may make available, with respect to property damage
1043	liability coverage, a deductible amount not to exceed \$500. In
1044	the event of a property damage loss covered by a policy

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containing a property damage deductible provision, the insurer shall pay to the third-party claimant the amount of any property damage liability settlement or judgment, subject to policy limits, as if no deductible existed.

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- (b) An operator's motor vehicle liability policy of insurance $\underline{\text{must}}$ shall insure the person $\underline{\text{or persons}}$ named therein against loss from the liability imposed $\underline{\text{upon him or her}}$ by law for damages arising out of the use by the person of any motor vehicle not owned by him or her, with the same territorial limits and subject to the same limits of liability as referred to above with respect to an owner's policy of liability insurance.
- (c) All such motor vehicle liability policies must shall state the name and address of the named insured, the coverage afforded by the policy, the premium charged therefor, the policy period, the limits of liability, and must shall contain an agreement or be endorsed that insurance is provided in accordance with the coverage defined in this chapter as respects bodily injury and death or property damage or both and is subject to all provisions of this chapter. The Said policies must shall also contain a provision that the satisfaction by an insured of a judgment for such injury or damage may shall not be a condition precedent to the right or duty of the insurance carrier to make payment on account of such injury or damage, and must shall also contain a provision that bankruptcy or insolvency of the insured or of the insured's estate may shall not relieve the insurance carrier of any of its obligations under the said policy.
 - (2) The provisions of This section is shall not be

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1074	applicable to any automobile liability policy unless and until
1075	it is furnished as proof of financial responsibility for the
1076	future pursuant to s. 324.031, and then only from and after the
1077	date the said policy is so furnished.
1078	Section 22. Section 324.161, Florida Statutes, is amended
1079	to read:
1080	324.161 Proof of financial responsibility; deposit.—If a
1081	person elects to prove his or her financial responsibility under
1082	the method of proof specified in s. 324.031(1)(b), he or she
1083	must obtain proof of a certificate of deposit annually, in the
1084	amount required under s. 324.031(2), from a financial
1085	institution insured by the Federal Deposit Insurance Corporation
1086	or the National Credit Union Administration. Proof of such
1087	certificate of deposit Annually, before any certificate of
1088	insurance may be issued to a person, including any firm,
1089	partnership, association, corporation, or other person, other
1090	than a natural person, proof of a certificate of deposit of
1091	\$30,000 issued and held by a financial institution must be
1092	submitted to the department annually. A power of attorney will
1093	be issued to and held by the department and may be executed upon
1094	a judgment issued against such person making the deposit, for
1095	damages <u>for</u> because of bodily injury to or death of any person
1096	or for damages for because of injury to or destruction of
1097	property resulting from the use or operation of any motor
1098	vehicle occurring after such deposit was made. Money so
1099	deposited $\underline{\text{is}}$ shall not be subject to attachment or execution
1100	unless such attachment or execution $\underline{\text{arises}}$ $\underline{\text{shall arise}}$ out of a
1101	<u>lawsuit</u> suit for <u>such</u> damages as aforesaid .
1102	Section 23. Subsections (1) and (2) of section 324.171,

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597-01963-18 2018150c1 1103 Florida Statutes, are amended to read: 1104 324.171 Self-insurer.-1105 (1) A Any person may qualify as a self-insurer by obtaining 1106 a certificate of self-insurance from the department. which may, 1107 in its discretion and Upon application of such a person, the department may issue a said certificate of self-insurance if the 1108 1109 applicant when such person has satisfied the requirements of 1110 this section to qualify as a self-insurer under this section: 1111 (a) A private individual with private passenger vehicles 1112 must shall possess a net unencumbered worth: of 1113 1. Beginning January 1, 2019, through December 31, 2020, of 1114 at least \$80,000. 1115 2. Beginning January 1, 2021, through December 31, 2022, of 1116 at least \$100,000. 1117 3. Beginning January 1, 2023, and thereafter, of at least 1118 \$120,000 \$40,000. 1119 (b) A person, including any firm, partnership, association, 1120 corporation, or other person, other than a natural person, must 1121 shall: 1122 1. Possess a net unencumbered worth: of 1123 a. Beginning January 1, 2019, through December 31, 2020, of 1124 at least \$80,000 for the first motor vehicle and \$40,000 for 1125 each additional motor vehicle. 1126 b. Beginning January 1, 2021, through December 31, 2022, of 1127 at least \$100,000 for the first motor vehicle and \$50,000 for 1128 each additional motor vehicle. 1129 c. Beginning January 1, 2023, and thereafter, of at least 1130 \$120,000 \$40,000 for the first motor vehicle and \$60,000 \$20,000

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for each additional motor vehicle; or

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1132	2. Maintain sufficient net worth, in an amount determined
1133	by the department, to be financially responsible for potential
1134	losses. The department shall annually determine the minimum net
1135	worth sufficient to satisfy this subparagraph as determined
1136	annually by the department, pursuant to rules adopted
1137	$rac{ extstyle promulgated}{ extstyle the department}_{ extstyle T}$ with the assistance of the Office
1138	of Insurance Regulation of the Financial Services Commission, to
1139	be financially responsible for potential losses. The rules $\underline{\text{must}}$
1140	consider any shall take into consideration excess insurance
1141	carried by the applicant. The department's determination $\underline{\text{must}}$
1142	shall be based upon reasonable actuarial principles considering
1143	the frequency, severity, and loss development of claims incurred
1144	by casualty insurers writing coverage on the type of motor
1145	vehicles for which a certificate of self-insurance is desired.
1146	(c) The owner of a commercial motor vehicle, as defined in
1147	s. 207.002 or s. 320.01, may qualify as a self-insurer subject
1148	to the standards provided for in subparagraph (b)2.
1149	(2) The self-insurance certificate $\underline{\text{must}}$ $\underline{\text{shall}}$ provide
1150	limits of liability insurance in the amounts specified under s .
1151	324.021(7) or s. 627.7415 and shall provide personal injury
1152	protection coverage under s. 627.733(3)(b).
1153	Section 24. Section 324.251, Florida Statutes, is amended
1154	to read:
1155	324.251 Short title.—This chapter may be cited as the
1156	"Financial Responsibility Law of $\underline{2018}$ $\underline{1955}$ " and \underline{is} \underline{shall} \underline{become}
1157	effective at 12:01 a.m., <u>January 1, 2019</u> October 1, 1955 .
1158	Section 25. Subsection (4) of section 400.9905, Florida
1159	Statutes, is amended to read:
1160	400.9905 Definitions

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- (4) "Clinic" means an entity where health care services are provided to individuals and which tenders charges for reimbursement for such services, including a mobile clinic and a portable equipment provider. As used in this part, the term does not include and the licensure requirements of this part do not apply to:
- (a) Entities licensed or registered by the state under chapter 395; entities licensed or registered by the state and providing only health care services within the scope of services authorized under their respective licenses under ss. 383.30-383.335, chapter 390, chapter 394, chapter 397, this chapter except part X, chapter 429, chapter 463, chapter 465, chapter 466, chapter 478, part I of chapter 483, chapter 484, or chapter 651; end-stage renal disease providers authorized under 42 C.F.R. part 405, subpart U; providers certified under 42 C.F.R. part 485, subpart B or subpart H; or any entity that provides neonatal or pediatric hospital-based health care services or other health care services by licensed practitioners solely within a hospital licensed under chapter 395.
- (b) Entities that own, directly or indirectly, entities licensed or registered by the state pursuant to chapter 395; entities that own, directly or indirectly, entities licensed or registered by the state and providing only health care services within the scope of services authorized pursuant to their respective licenses under ss. 383.30-383.335, chapter 390, chapter 394, chapter 397, this chapter except part X, chapter 429, chapter 463, chapter 465, chapter 466, chapter 478, part I of chapter 483, chapter 484, or chapter 651; end-stage renal disease providers authorized under 42 C.F.R. part 405, subpart

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

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

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

- (e) An entity that is exempt from federal taxation under 26 U.S.C. s. 501(c)(3) or (4), an employee stock ownership plan under 26 U.S.C. s. 409 that has a board of trustees at least two-thirds of which are Florida-licensed health care practitioners and provides only physical therapy services under physician orders, any community college or university clinic, and any entity owned or operated by the federal or state government, including agencies, subdivisions, or municipalities thereof.
- (f) A sole proprietorship, group practice, partnership, or corporation that provides health care services by physicians covered by s. 627.419, that is directly supervised by one or more of such physicians, and that is wholly owned by one or more of those physicians or by a physician and the spouse, parent, child, or sibling of that physician.
- (g) A sole proprietorship, group practice, partnership, or corporation that provides health care services by licensed health care practitioners under chapter 457, chapter 458, chapter 459, chapter 460, chapter 461, chapter 462, chapter 463, chapter 466, chapter 467, chapter 480, chapter 484, chapter 486, chapter 490, chapter 491, or part I, part III, part X, part XIII, or part XIV of chapter 468, or s. 464.012, and that is wholly owned by one or more licensed health care practitioners, or the licensed health care practitioners set forth in this paragraph and the spouse, parent, child, or sibling of a

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licensed health care practitioner if one of the owners who is a licensed health care practitioner is supervising the business activities and is legally responsible for the entity's compliance with all federal and state laws. However, a health care practitioner may not supervise services beyond the scope of the practitioner's license, except that, for the purposes of this part, a clinic owned by a licensee in s. 456.053(3)(b) which provides only services authorized pursuant to s. 456.053(3)(b) may be supervised by a licensee specified in s. 456.053(3)(b).

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- (h) Clinical facilities affiliated with an accredited medical school at which training is provided for medical students, residents, or fellows.
- (i) Entities that provide only oncology or radiation therapy services by physicians licensed under chapter 458 or chapter 459 or entities that provide oncology or radiation therapy services by physicians licensed under chapter 458 or chapter 459 which are owned by a corporation whose shares are publicly traded on a recognized stock exchange.
- (j) Clinical facilities affiliated with a college of chiropractic accredited by the Council on Chiropractic Education at which training is provided for chiropractic students.
- (k) Entities that provide licensed practitioners to staff emergency departments or to deliver anesthesia services in facilities licensed under chapter 395 and that derive at least 90 percent of their gross annual revenues from the provision of such services. Entities claiming an exemption from licensure under this paragraph must provide documentation demonstrating compliance.

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- (1) Orthotic, prosthetic, pediatric cardiology, or perinatology clinical facilities or anesthesia clinical facilities that are not otherwise exempt under paragraph (a) or paragraph (k) and that are a publicly traded corporation or are wholly owned, directly or indirectly, by a publicly traded corporation. As used in this paragraph, a publicly traded corporation is a corporation that issues securities traded on an exchange registered with the United States Securities and Exchange Commission as a national securities exchange.
- (m) Entities that are owned by a corporation that has \$250million or more in total annual sales of health care services provided by licensed health care practitioners where one or more of the persons responsible for the operations of the entity is a health care practitioner who is licensed in this state and who is responsible for supervising the business activities of the entity and is responsible for the entity's compliance with state law for purposes of this part.
- (n) Entities that employ 50 or more licensed health care practitioners licensed under chapter 458 or chapter 459 where the billing for medical services is under a single tax identification number. The application for exemption under this subsection must include shall contain information that includes: the name, residence, and business address and telephone phone number of the entity that owns the practice; a complete list of the names and contact information of all the officers and directors of the corporation; the name, residence address, business address, and medical license number of each licensed Florida health care practitioner employed by the entity; the corporate tax identification number of the entity seeking an

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1306	exemption; a listing of health care services to be provided by
1307	the entity at the health care clinics owned or operated by the
1308	$\operatorname{entity}_{\underline{i}}$ and a certified statement prepared by an independent
1309	certified public accountant which states that the entity and the
1310	health care clinics owned or operated by the entity have not
1311	received payment for health care services under $\underline{\text{medical payments}}$
1312	personal injury protection insurance coverage for the preceding
1313	year. If the agency determines that an entity $\underline{\text{that}}$ $\underline{\text{which}}$ is
1314	exempt under this subsection has received payments for medical
1315	services under medical payments personal injury protection
1316	insurance coverage, the agency may deny or revoke the exemption
1317	from licensure under this subsection.
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1319	Notwithstanding this subsection, an entity shall be deemed a
1320	clinic and must be licensed under this part in order to receive
1321	$\underline{\text{medical payments coverage}}$ reimbursement under $\underline{\text{s. }627.7265}$ the
1322	Florida Motor Vehicle No-Fault Law, ss. 627.730-627.7405, unless
1323	exempted under s. 627.736(5)(h).
1324	Section 26. Subsection (6) of section 400.991, Florida
1325	Statutes, is amended to read:
1326	400.991 License requirements; background screenings;
1327	prohibitions
1328	(6) All agency forms for licensure application or exemption
1329	from licensure under this part must contain the following
1330	statement:
1331	
1332	INSURANCE FRAUD NOTICE.—A person commits a fraudulent
1333	insurance act, as defined in s. 626.989, Florida
1334	Statutes, if the person who knowingly submits a false,

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misleading, or fraudulent application or other document when applying for licensure as a health care clinic, seeking an exemption from licensure as a health care clinic, or demonstrating compliance with part X of chapter 400, Florida Statutes, with the intent to use the license, exemption from licensure, or demonstration of compliance to provide services or seek reimbursement under a motor vehicle liability insurance policy's medical payments coverage the Florida Motor Vehicle No-Fault Law, commits a fraudulent insurance act, as defined in s. 626.989, Florida Statutes. A person who presents a claim for benefits under medical payments coverage, personal injury protection benefits knowing that the payee knowingly submitted such health care clinic application or document, commits insurance fraud, as defined in s. 817.234, Florida Statutes. Section 27. Paragraph (g) of subsection (1) of section 400.9935, Florida Statutes, is amended to read: 400.9935 Clinic responsibilities.-

- (1) Each clinic shall appoint a medical director or clinic director who shall agree in writing to accept legal responsibility for the following activities on behalf of the clinic. The medical director or the clinic director shall:
- (g) Conduct systematic reviews of clinic billings to ensure that the billings are not fraudulent or unlawful. Upon discovery of an unlawful charge, the medical director or clinic director shall take immediate corrective action. If the clinic performs only the technical component of magnetic resonance imaging,

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1364	static radiographs, computed tomography, or positron emission
1365	tomography, and provides the professional interpretation of such
1366	services, in a fixed facility that is accredited by a national
1367	accrediting organization that is approved by the Centers for
1368	Medicare and Medicaid Services for magnetic resonance imaging
1369	and advanced diagnostic imaging services and if, in the
1370	preceding quarter, the percentage of scans performed by that
1371	clinic which was billed to motor vehicle all personal injury
1372	protection insurance carriers under medical payments coverage
1373	was less than 15 percent, the chief financial officer of the
1374	clinic may, in a written acknowledgment provided to the agency,
1375	assume the responsibility for the conduct of the systematic
1376	reviews of clinic billings to ensure that the billings are not
1377	fraudulent or unlawful.
1378	Section 28. Subsection (28) of section 409.901, Florida
1379	Statutes, is amended to read:
1380	409.901 Definitions; ss. 409.901-409.920.—As used in ss.
1381	409.901-409.920, except as otherwise specifically provided, the
1382	term:
1383	(28) "Third-party benefit" means any benefit that is or may
1384	be available at any time through contract, court award,
1385	judgment, settlement, agreement, or any arrangement between a
1386	third party and any person or entity, including, without
1387	limitation, a Medicaid recipient, a provider, another third
1388	party, an insurer, or the agency, for any Medicaid-covered
1389	injury, illness, goods, or services, including costs of medical
1390	services related thereto, for <u>bodily</u> personal injury or for
1391	death of the recipient, but specifically excluding policies of
1392	life insurance <u>policies</u> on the recipient, unless available under

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terms of the policy to pay medical expenses before prior to death. The term includes, without limitation, collateral, as defined in this section, health insurance, any benefit under a health maintenance organization, a preferred provider arrangement, a prepaid health clinic, liability insurance, uninsured motorist insurance, medical payments coverage or personal injury protection coverage, medical benefits under workers' compensation, and any obligation under law or equity to provide medical support.

Section 29. Paragraph (f) of subsection (11) of section 409.910, Florida Statutes, is amended to read:

409.910 Responsibility for payments on behalf of Medicaideligible persons when other parties are liable.-

- (11) The agency may, as a matter of right, in order to enforce its rights under this section, institute, intervene in, or join any legal or administrative proceeding in its own name in one or more of the following capacities: individually, as subrogee of the recipient, as assignee of the recipient, or as lienholder of the collateral.
- (f) Notwithstanding any provision in this section to the contrary, in the event of an action in tort against a third party in which the recipient or his or her legal representative is a party which results in a judgment, award, or settlement from a third party, the amount recovered shall be distributed as follows:
- 1. After attorney attorney's fees and taxable costs as defined by the Florida Rules of Civil Procedure, one-half of the remaining recovery shall be paid to the agency up to the total amount of medical assistance provided by Medicaid.

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1422 2. The remaining amount of the recovery shall be paid to the recipient.

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- 3. For purposes of calculating the agency's recovery of medical assistance benefits paid, the fee for services of an attorney retained by the recipient or his or her legal representative shall be calculated at 25 percent of the judgment, award, or settlement.
- 1429 4. Notwithstanding any other provision of this section to 1430 the contrary, the agency shall be entitled to all medical 1431 coverage benefits up to the total amount of medical assistance 1432 provided by Medicaid. For purposes of this paragraph, the term "medical coverage" means any benefits under health insurance, a 1433 1434 health maintenance organization, a preferred provider 1435 arrangement, or a prepaid health clinic, and the portion of 1436 benefits designated for medical payments under coverage for workers' compensation coverage, motor vehicle insurance 1437 1438 coverage, personal injury protection, and casualty coverage.

Section 30. Paragraph (k) of subsection (2) of section 456.057, Florida Statutes, is amended to read:

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

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

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1451	(k) Persons or entities practicing under $\underline{s. 627.7265}$ $\underline{s.}$
1452	627.736(7) .
1453	Section 31. Paragraphs (ee) and (ff) of subsection (1) of
1454	section 456.072, Florida Statutes, are amended to read:
1455	456.072 Grounds for discipline; penalties; enforcement.—
1456	(1) The following acts shall constitute grounds for which
1457	the disciplinary actions specified in subsection (2) may be
1458	taken:
1459	(ee) With respect to making a medical payments coverage
1460	personal injury protection claim under s. 627.7265 as required
1461	by s. 627.736, intentionally submitting a claim, statement, or
1462	bill that has been upcoded. As used in this paragraph, the term
1463	"upcoded" means an action that submits a billing code that would
1464	$\underline{\text{result in payment greater in amount than would be paid using a}}$
1465	billing code that accurately describes the services performed.
1466	The term does not include an otherwise lawful bill by a magnetic
1467	resonance imaging facility, which globally combines both
1468	technical and professional components, if the amount of the
1469	global bill is not more than the components if billed
1470	separately; however, payment of such a bill constitutes payment
1471	in full for all components of such service "upcoded" as defined
1472	in s. 627.732 .
1473	(ff) With respect to making a <u>medical payments coverage</u>
1474	personal injury protection claim as required under s. 627.7265
1475	by s. 627.736, intentionally submitting a claim, statement, or
1476	bill for payment of services that were not rendered.
1477	Section 32. Paragraphs (i) and (o) of subsection (1) of
1478	section 626.9541, Florida Statutes, are amended to read:
1479	626.9541 Unfair methods of competition and unfair or

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1480	deceptive acts or practices defined
1481	(1) UNFAIR METHODS OF COMPETITION AND UNFAIR OR DECEPTIVE
1482	ACTS.—The following are defined as unfair methods of competition
1483	and unfair or deceptive acts or practices:
1484	(i) Unfair claim settlement practices
1485	1. Attempting to settle claims on the basis of an
1486	application, when serving as a binder or intended to become a
1487	part of the policy, or any other material document which was
1488	altered without notice to, or knowledge or consent of, the
1489	insured;
1490	2. A material misrepresentation made to an insured or any
1491	other person having an interest in the proceeds payable under
1492	such contract or policy, for the purpose and with the intent of
1493	effecting settlement of such claims, loss, or damage under such
1494	contract or policy on less favorable terms than those provided
1495	in, and contemplated by, such contract or policy; $\frac{\partial}{\partial x}$
1496	3. Committing or performing with such frequency as to
1497	indicate a general business practice any of the following:
1498	a. Failing to adopt and implement standards for the proper
1499	investigation of claims;
1500	b. Misrepresenting pertinent facts or insurance policy
1501	provisions relating to coverages at issue;
1502	c. Failing to acknowledge and act promptly upon
1503	communications with respect to claims;
1504	d. Denying claims without conducting reasonable
1505	investigations based upon available information;
1506	e. Failing to affirm or deny full or partial coverage of
1507	claims, and, as to partial coverage, the dollar amount or extent
1508	of coverage, or failing to provide a written statement that the

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claim is being investigated, upon the written request of the insured within 30 days after proof-of-loss statements have been completed;

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- f. Failing to promptly provide a reasonable explanation in writing to the insured of the basis in the insurance policy, in relation to the facts or applicable law, for denial of a claim or for the offer of a compromise settlement;
- g. Failing to promptly notify the insured of any additional information necessary for the processing of a claim; or
- h. Failing to clearly explain the nature of the requested information and the reasons why such information is necessary.

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

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

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1538 benefits are owed.

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- (o) Illegal dealings in premiums; excess or reduced charges for insurance.—
- 1. Knowingly collecting any sum as a premium or charge for insurance, which is not then provided, or is not in due course to be provided, subject to acceptance of the risk by the insurer, by an insurance policy issued by an insurer as permitted by this code.
- 1546 2. Knowingly collecting as a premium or charge for 1547 insurance any sum in excess of or less than the premium or 1548 charge applicable to such insurance, in accordance with the applicable classifications and rates as filed with and approved 1549 1550 by the office, and as specified in the policy; or, in cases when 1551 classifications, premiums, or rates are not required by this 1552 code to be so filed and approved, premiums and charges collected 1553 from a Florida resident in excess of or less than those 1554 specified in the policy and as fixed by the insurer. 1555 Notwithstanding any other provision of law, this provision shall 1556 not be deemed to prohibit the charging and collection, by 1557 surplus lines agents licensed under part VIII of this chapter, 1558 of the amount of applicable state and federal taxes, or fees as 1559 authorized by s. 626.916(4), in addition to the premium required 1560 by the insurer or the charging and collection, by licensed 1561 agents, of the exact amount of any discount or other such fee 1562 charged by a credit card facility in connection with the use of 1563 a credit card, as authorized by subparagraph (g)3., in addition 1564 to the premium required by the insurer. This subparagraph shall 1565 not be construed to prohibit collection of a premium for a universal life or a variable or indeterminate value insurance 1566

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policy made in accordance with the terms of the contract.

- 3.a. Imposing or requesting an additional premium for bodily injury liability coverage, property damage liability coverage a policy of motor vehicle liability, personal injury protection, medical payment coverage, or collision coverage in a motor vehicle liability insurance policy insurance or any combination thereof or refusing to renew the policy solely because the insured was involved in a motor vehicle accident unless the insurer's file contains information from which the insurer in good faith determines that the insured was substantially at fault in the accident.
- b. An insurer which imposes and collects such a surcharge or which refuses to renew such policy shall, in conjunction with the notice of premium due or notice of nonrenewal, notify the named insured that he or she is entitled to reimbursement of such amount or renewal of the policy under the conditions listed below and will subsequently reimburse him or her or renew the policy, if the named insured demonstrates that the operator involved in the accident was:
 - (I) Lawfully parked;

- (II) Reimbursed by, or on behalf of, a person responsible for the accident or has a judgment against such person;
- (III) Struck in the rear by another vehicle headed in the same direction and was not convicted of a moving traffic violation in connection with the accident;
- (IV) Hit by a "hit-and-run" driver, if the accident was reported to the proper authorities within 24 hours after discovering the accident;
 - (V) Not convicted of a moving traffic violation in

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1596	connection with the accident, but the operator of the other
1597	automobile involved in such accident was convicted of a moving
1598	traffic violation;
1599	(VI) Finally adjudicated not to be liable by a court of
1600	competent jurisdiction;
1601	(VII) In receipt of a traffic citation which was dismissed
1602	or nolle prossed; or
1603	(VIII) Not at fault as evidenced by a written statement
1604	from the insured establishing facts demonstrating lack of fault
1605	which are not rebutted by information in the insurer's file from
1606	which the insurer in good faith determines that the insured was
1607	substantially at fault.
1608	c. In addition to the other provisions of this
1609	subparagraph, an insurer may not fail to renew a policy if the
1610	insured has had only one accident in which he or she was at
1611	fault within the current 3-year period. However, an insurer may
1612	nonrenew a policy for reasons other than accidents in accordance
1613	with s. 627.728. This subparagraph does not prohibit nonrenewal
1614	of a policy under which the insured has had three or more
1615	accidents, regardless of fault, during the most recent 3-year
1616	period.
1617	4. Imposing or requesting an additional premium for, or
1618	refusing to renew, a policy for motor vehicle insurance solely
1619	because the insured committed a noncriminal traffic infraction
1620	as described in s. 318.14 unless the infraction is:
1621	a. A second infraction committed within an 18-month period,
1622	or a third or subsequent infraction committed within a 36-month
1623	period.
1624	b. A violation of s. 316.183, when such violation is a

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result of exceeding the lawful speed limit by more than 15 miles per hour.

- 5. Upon the request of the insured, the insurer and licensed agent shall supply to the insured the complete proof of fault or other criteria which justifies the additional charge or cancellation.
- 6. No insurer shall impose or request an additional premium for motor vehicle insurance, cancel or refuse to issue a policy, or refuse to renew a policy because the insured or the applicant is a handicapped or physically disabled person, so long as such handicap or physical disability does not substantially impair such person's mechanically assisted driving ability.
- 7. No insurer may cancel or otherwise terminate any insurance contract or coverage, or require execution of a consent to rate endorsement, during the stated policy term for the purpose of offering to issue, or issuing, a similar or identical contract or coverage to the same insured with the same exposure at a higher premium rate or continuing an existing contract or coverage with the same exposure at an increased premium.
- 8. No insurer may issue a nonrenewal notice on any insurance contract or coverage, or require execution of a consent to rate endorsement, for the purpose of offering to issue, or issuing, a similar or identical contract or coverage to the same insured at a higher premium rate or continuing an existing contract or coverage at an increased premium without meeting any applicable notice requirements.
- 9. No insurer shall, with respect to premiums charged for motor vehicle insurance, unfairly discriminate solely on the

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1654	basis of age, sex, marital status, or scholastic achievement.
1655	10. Imposing or requesting an additional premium for motor
1656	vehicle comprehensive or uninsured motorist coverage solely
1657	because the insured was involved in a motor vehicle accident or
1658	was convicted of a moving traffic violation.
1659	11. No insurer shall cancel or issue a nonrenewal notice on
1660	any insurance policy or contract without complying with any
1661	applicable cancellation or nonrenewal provision required under
1662	the Florida Insurance Code.
1663	12. No insurer shall impose or request an additional
1664	premium, cancel a policy, or issue a nonrenewal notice on any
1665	insurance policy or contract because of any traffic infraction
1666	when adjudication has been withheld and no points have been
1667	assessed pursuant to s. $318.14(9)$ and (10) . However, this
1668	subparagraph does not apply to traffic infractions involving
1669	accidents in which the insurer has incurred a loss due to the
1670	fault of the insured.
1671	Section 33. Paragraph (a) of subsection (1) of section
1672	626.989, Florida Statutes, is amended to read:
1673	626.989 Investigation by department or Division of
1674	Investigative and Forensic Services; compliance; immunity;
1675	confidential information; reports to division; division
1676	investigator's power of arrest
1677	(1) For the purposes of this section:
1678	(a) A person commits a "fraudulent insurance act" if the
1679	person:
1680	1. Knowingly and with intent to defraud presents, causes to
1681	be presented, or prepares with knowledge or belief that it will
1682	be presented, to or by an insurer, self-insurer, self-insurance

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fund, servicing corporation, purported insurer, broker, or any agent thereof, any written statement as part of, or in support of, an application for the issuance of, or the rating of, any insurance policy, or a claim for payment or other benefit pursuant to any insurance policy, which the person knows to contain materially false information concerning any fact material thereto or if the person conceals, for the purpose of misleading another, information concerning any fact material thereto.

2. Knowingly submits:

- a. A false, misleading, or fraudulent application or other document when applying for licensure as a health care clinic, seeking an exemption from licensure as a health care clinic, or demonstrating compliance with part X of chapter 400 with an intent to use the license, exemption from licensure, or demonstration of compliance to provide services or seek reimbursement under a motor vehicle liability insurance policy's medical payments coverage the Florida Motor Vehicle No-Fault Law.
- b. A claim for payment or other benefit <u>under medical</u> <u>payments coverage pursuant to a personal injury protection</u> <u>insurance policy under the Florida Motor Vehicle No-Fault Law</u> if the person knows that the payee knowingly submitted a false, misleading, or fraudulent application or other document when applying for licensure as a health care clinic, seeking an exemption from licensure as a health care clinic, or demonstrating compliance with part X of chapter 400.

Section 34. Subsection (1) of section 627.06501, Florida Statutes, is amended to read:

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

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

Section 35. Subsection (1) of section 627.0652, Florida Statutes, is amended to read:

627.0652 Insurance discounts for certain persons completing safety course.—

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

Section 36. Subsections (1), (3), and (6) of section

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627.0653, Florida Statutes, are amended to read:

- 627.0653 Insurance discounts for specified motor vehicle equipment.—
- (1) Any rates, rating schedules, or rating manuals for the liability, medical payments personal injury protection, and collision coverages of a motor vehicle insurance policy filed with the office must shall provide a premium discount if the insured vehicle is equipped with factory-installed, four-wheel antilock brakes.
- (3) Any rates, rating schedules, or rating manuals for personal injury protection coverage and medical payments coverage, if offered, of a motor vehicle insurance policy filed with the office <u>must shall</u> provide a premium discount if the insured vehicle is equipped with one or more air bags <u>that</u> which are factory installed.
- (6) The Office of Insurance Regulation may approve a premium discount to any rates, rating schedules, or rating manuals for the liability, medical payments personal injury protection, and collision coverages of a motor vehicle insurance policy filed with the office if the insured vehicle is equipped with autonomous driving technology or electronic vehicle collision avoidance technology that is factory installed or a retrofitted system and that complies with National Highway Traffic Safety Administration standards.

Section 37. Section 627.4132, Florida Statutes, is amended to read:

627.4132 Stacking of coverages prohibited.—If an insured or named insured is protected by any type of motor vehicle insurance policy for bodily injury and property damage

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1770	liability, personal injury protection, or other coverage, the
1771	policy $\underline{\text{must}}$ $\underline{\text{shall}}$ provide that the insured or named insured is
1772	protected only to the extent of the coverage she or he has on
1773	the vehicle involved in the accident. However, if none of the
1774	insured's or named insured's vehicles $\underline{\text{are}}\ \underline{\text{is}}$ involved in the
1775	accident, coverage is available only to the extent of coverage
1776	on any one of the vehicles with applicable coverage. Coverage on
1777	any other vehicles $\underline{\text{may}}$ $\underline{\text{shall}}$ not be added to or stacked upon
1778	that coverage. This section does not apply:
1779	(1) To uninsured motorist coverage $\underline{\text{that}}$ which is separately
1780	governed by s. 627.727.
1781	(2) To reduce the coverage available by reason of insurance
1782	policies insuring different named insureds.
1783	Section 38. Section 627.7263, Florida Statutes, is amended
1784	to read:
1785	627.7263 Rental and leasing driver's insurance to be
1786	<pre>primary; exception</pre>
1787	(1) The valid and collectible liability insurance $\underline{\text{and}}$
1788	<pre>medical payments coverage or personal injury protection</pre>
1789	insurance providing coverage for the lessor of a motor vehicle
1790	for rent or lease is primary unless otherwise stated in at least
1791	10-point type on the face of the rental or lease agreement. Such
1792	insurance is primary for the limits of liability and personal
1793	$\frac{\text{injury protection}}{\text{coverage}}$ as required by $\frac{\text{s. }324.021(7)}{\text{and}}$
1794	medical payments coverage as required under s. 627.7265 ss.
1795	324.021(7) and 627.736.
1796	(2) If the lessee's coverage is to be primary, the rental
1797	or lease agreement must contain the following language, in at

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1799 1800 "The valid and collectible liability insurance and 1801 medical payments coverage personal injury protection 1802 insurance of an any authorized rental or leasing 1803 driver is primary for the limits of liability and 1804 personal injury protection coverage and medical 1805 payments coverage required under ss. 324.021(7) and 1806 627.7265 by ss. 324.021(7) and 627.736, Florida 1807 Statutes." 1808 Section 39. Section 627.7265, Florida Statutes, is created 1809 to read: 1810 627.7265 Motor vehicle insurance; medical payments 1811 coverage.-1812 (1) MEDICAL PAYMENTS COVERAGE REQUIRED.—A motor vehicle 1813 liability insurance policy that is furnished as proof of 1814 financial responsibility pursuant to s. 324.031 must include 1815 medical payments coverage as provided in this section. The 1816 medical payments coverage must protect the named insured, 1817 resident relatives, persons operating the insured motor vehicle, 1818 passengers in the insured motor vehicle, and persons who are 1819 struck by the insured motor vehicle and suffer bodily injury 1820 while not an occupant of a self-propelled motor vehicle, to a 1821 limit of at least \$5,000 per person for medical expense incurred 1822 due to bodily injury, sickness, or disease arising out of the 1823 ownership, maintenance, or use of a motor vehicle. The medical 1824 payments coverage must also provide each such person with a 1825 death benefit of at least \$5,000. This section may not be

insurer. An insurer may not offer medical payments coverage with

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construed to limit any other coverage made available by an

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1828	a deductible to an applicant or policyholder.
1829	(2) REQUIRED BENEFITSMedical payments coverage must
1830	provide coverage for all of the following if medically necessary
1831	and the individual initially receives such treatment within 14
1832	days after the motor vehicle accident:
1833	(a) Emergency transport and treatment by a provider
1834	licensed under chapter 401.
1835	(b) Emergency services and care provided by a hospital
1836	licensed under chapter 395.
1837	(c) Emergency services and care as defined in s. 395.002,
1838	provided in a facility licensed under chapter 395 and rendered
1839	by a physician or dentist, and related hospital inpatient
1840	services rendered by a physician or dentist.
1841	(d) Hospital inpatient services, other than emergency
1842	services and care.
1843	(e) Hospital outpatient services, other than emergency
1844	services and care.
1845	(f) Physician services and care provided by a physician
1846	licensed under chapter 458 or chapter 459 or a chiropractic
1847	physician licensed under chapter 460, or dental services and
1848	care provided by a dentist licensed under chapter 466.
1849	(3) AUTHORIZED EXCLUSIONS.—Notwithstanding any other
1850	requirement in this section, an insurer may exclude medical
1851	<pre>payment benefits:</pre>
1852	(a) For injury sustained by the named insured or a resident
1853	relative while occupying another motor vehicle owned by the
1854	named insured and not insured under the policy, unless such
1855	vehicle qualifies as a newly acquired vehicle or temporary
1856	substitute vehicle.

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 $\underline{\hbox{ (b) For injury sustained by any person operating the}} \\ \underline{\hbox{insured motor vehicle without the express or implied consent of}} \\ \text{the insured.}$

- (c) For any person who intentionally causes injury to himself or herself.
 - (d) For any person injured while committing a felony.
 - (4) PAYMENT OF BENEFITS.-

- (a) Benefits due from an insurer under medical payments coverage are primary to any health insurance benefit of a person injured in a motor vehicle accident and apply to any coinsurance or deductible amount required by the injured person's health insurance policy, except that:
- 1. Benefits received under any workers' compensation law must be credited against medical payments coverage benefits, and are due and payable as losses accrue, upon reasonable proof of such losses and the amount of expenses and losses incurred which are covered by the policy issued under this section.
- 2. When the Agency for Health Care Administration provides, pays for, or becomes liable for medical assistance under the Medicaid program which is related to injury, sickness, disease, or death arising out of the ownership, maintenance, or use of a motor vehicle, medical payments benefits are subject to the provisions of the Medicaid program, and, within 30 days after receiving notice that the Medicaid program paid such benefits, the insurer must repay the full amount of the benefits to the Medicaid program.
- (b) A medical payments insurance policy may include a provision allowing subrogation for medical payments benefits paid, if the expenses giving rise to the payments were caused by

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1886	wrongful act or omission of another.
1887	(c) Upon receiving notice of an accident that is
1888	potentially covered by medical payments coverage benefits, the
1889	insurer must reserve \$2,500 of medical payments coverage
1890	benefits for payment to physicians licensed under chapter 458 or
1891	chapter 459 or dentists licensed under chapter 466 who provide
1892	emergency services and care, as defined in s. 395.002, or who
1893	provide hospital inpatient care. The amount required to be held
1894	in reserve may be used only to pay claims from such physicians
1895	or dentists until 30 days after the date the insurer receives
1896	notice of the accident. After the 30-day period, any amount of
1897	the reserve for which the insurer has not received notice of
1898	such claims may be used by the insurer to pay other claims. This
1899	paragraph does not require an insurer to establish a claim
1900	reserve for insurance accounting purposes.
1901	(5) CHARGES FOR CARE OF INJURED PERSONS.—
1902	(a) A physician, hospital, clinic, or other person or
1903	institution lawfully providing medical care to an injured person
1904	for a bodily injury covered by medical payments coverage may
1905	charge the insurer and injured party only a reasonable amount
1906	pursuant to this section. However, such charges may not exceed
1907	the amount the person or institution customarily charges for
1908	like medical care. In determining whether a charge for a
1909	particular service, treatment, supply, or prescription is
1910	reasonable, consideration may be given to evidence of usual and
1911	customary charges and payments accepted by the provider involved
1912	in the dispute; reimbursement levels in the community and
1913	various federal and state medical fee schedules applicable to

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motor vehicle and other insurance coverages; and other

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1915	information relevant to the reasonableness of the reimbursement
1916	for the service, treatment, supply, or prescription.
1917	1. The insurer may limit reimbursement to the following
1918	schedule of maximum charges:
1919	a. For emergency transport and treatment by providers
1920	licensed under chapter 401, 200 percent of Medicare.
1921	b. For emergency services and care provided by a hospital
1922	licensed under chapter 395, 75 percent of the hospital's usual
1923	and customary charges.
1924	c. For emergency services and care, as defined in s.
1925	395.002, provided in a facility licensed under chapter 395 and
1926	rendered by a physician or dentist, and related hospital
1927	inpatient services rendered by a physician or dentist, the usual
1928	and customary charges in the community.
1929	d. For hospital inpatient services other than emergency
1930	services and care, 200 percent of the Medicare Part A
1931	prospective payment applicable to the specific hospital
1932	providing the inpatient services.
1933	e. For hospital outpatient services other than emergency
1934	services and care, 200 percent of the Medicare Part A Ambulatory
1935	Payment Classification for the specific hospital providing the
1936	outpatient services.
1937	
1938	However, if such services, supplies, or care is not reimbursable
1939	under Medicare Part B as provided in this sub-subparagraph, the
1940	insurer may limit reimbursement to 80 percent of the maximum
1941	reimbursable allowance under workers' compensation. Services,
1942	supplies, or care that is not reimbursable under Medicare or
1943	workers' compensation is not required to be reimbursed by the

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1944	insurer.
1945	2. For purposes of subparagraph 1., the applicable fee
1946	schedule or payment limitation under Medicare is the fee
1947	schedule or payment limitation in effect on March 1 of the
1948	service year in which the services, supplies, or care is
1949	rendered and for the area in which the services, supplies, or
1950	care is rendered. The applicable fee schedule or payment
1951	limitation applies to services, supplies, or care rendered
1952	during that service year notwithstanding any subsequent change
1953	made to the fee schedule or payment limitation; however, it may
1954	not be less than the allowable amount under the applicable
1955	schedule of Medicare Part B for 2007 for medical services,
1956	supplies, and care subject to Medicare Part B. For purposes of
1957	this subparagraph, the term "service year" means the period from
1958	March 1 through the end of February of the following year.
1959	3. For purposes of subparagraph 1., the applicable fee
1960	schedule or payment limitation under workers' compensation is
1961	determined under s. 440.13 and rules adopted thereunder which
1962	are in effect at the time such services, supplies, or care is
1963	<pre>provided.</pre>
1964	4. Subparagraph 1. does not authorize the insurer to apply
1965	any limitation on the number of treatments or other utilization
1966	limits that apply under Medicare or workers' compensation. An
1967	insurer that applies the allowable payment limitations of
1968	subparagraph 1. must reimburse a provider who lawfully provided
1969	medical care under the scope of his or her license, regardless
1970	of whether the provider is entitled to reimbursement under
1971	Medicare or workers' compensation due to restrictions or

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<u>limitations</u> on the types or discipline of health care providers

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who may be reimbursed for particular procedures or procedure

codes. However, subparagraph 1. does not prohibit an insurer

from using the Medicare coding policies and payment

methodologies of the federal Centers for Medicare and Medicaid

Services, including applicable modifiers, to determine the

appropriate amount of reimbursement for medical services,

supplies, or care, if the coding policy or payment methodology

does not constitute a utilization limit.

5. If an insurer limits payment as authorized by

- 5. If an insurer limits payment as authorized by subparagraph 1., the person providing such medical care may not bill or attempt to collect from the insured any amount in excess of such limits, except for amounts that are not covered by the insured's medical payments benefits due to the maximum policy limits.
- 6. An insurer may limit payment as authorized by this paragraph only if the insurance policy includes a notice at the time of issuance or renewal that the insurer may limit payment pursuant to the schedule of charges specified in this paragraph. A policy form approved by the office satisfies this requirement. If a provider submits a charge for an amount less than the amount allowed under subparagraph 1., the insurer may pay the amount of the charge submitted.
- (b) 1. An insurer or insured is not required to pay a claim or charges:
- a. For any service or treatment that was not lawful at the time rendered;
- b. To any person who knowingly submits a false or

 misleading statement relating to the claim or charges; or

 c. For any treatment or service that is upcoded or that is

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2002	unbundled when the treatment or services should be bundled. To
2003	facilitate prompt payment of lawful services, an insurer may
2004	change codes that it determines have been improperly or
2005	incorrectly upcoded or unbundled and may make payment based on
2006	the changed codes, without affecting the right of the provider
2007	to dispute the change by the insurer, if, before doing so, the
2008	insurer contacts the health care provider and discusses the
2009	reasons for the insurer's change and the health care provider's
2010	reason for the coding, or makes a reasonable good faith effort
2011	to do so, as documented in the insurer's file.
2012	2. The Department of Health, in consultation with the
2013	appropriate professional licensing boards, shall adopt by rule a
2014	list of diagnostic tests deemed not to be medically necessary
2015	for use in the treatment of persons sustaining bodily injury
2016	covered by medical payments benefits under this section. The
2017	list must be revised from time to time as determined by the
2018	Department of Health in consultation with the respective
2019	professional licensing boards. Inclusion of a test on the list
2020	must be based on a lack of demonstrated medical value and a
2021	level of general acceptance by the relevant provider community
2022	and may not be dependent on results based entirely upon
2023	subjective patient response. Notwithstanding its inclusion on a
2024	fee schedule in this subsection, an insurer or insured is not
2025	required to pay any charges or reimburse claims for an invalid
2026	diagnostic test as determined by the Department of Health.
2027	(c) With respect to any medical care other than medical
2028	services billed by a hospital or other provider for emergency
2029	services and care, as defined in s. 395.002, or inpatient
2030	services rendered at a hospital-owned facility, the statement of

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2031 charges must be furnished to the insurer by the provider. 2032 (d) All statements and bills for medical services rendered 2033 by a physician, hospital, clinic, or other person or institution 2034 must be submitted to the insurer on a properly completed Centers 2035 for Medicare and Medicaid Services Form CMS-1500, a UB-92 form, or any other standard form approved by the office and adopted by 2036 2037 the commission for purposes of this paragraph. All billings for 2038 such services rendered by providers must, to the extent 2039 applicable, comply with the Form CMS-1500 instructions, the 2040 codes established by the American Medical Association's Current 2041 Procedural Terminology Editorial Panel, and the Healthcare 2042 Common Procedure Coding System (HCPCS) and must follow the 2043 Physicians' Current Procedural Terminology (CPT), the HCPCS in 2044 effect for the year in which services are rendered, and the 2045 International Classification of Diseases adopted by the United 2046 States Department of Health and Human Services in effect for the 2047 year in which services are rendered. The guidance for 2048 determining compliance with applicable CPT and HCPCS coding must 2049 be provided by the CPT or the HCPCS in effect for the year in 2050 which services were rendered, the Office of the Inspector 2051 General, Physicians Compliance Guidelines, and other authoritative treatises designated by rule by the Agency for 2052 2053 Health Care Administration. A statement of medical services may 2054 not include charges for medical services of a person or entity 2055 that performed such services without possessing the valid 2056 licenses required to perform such services. 2057 (6) CIVIL ACTION FOR INSURANCE FRAUD.—An insurer has a 2058 cause of action against any person convicted of, or who, 2059 regardless of adjudication of guilt, pleads guilty or nolo

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2060	contendere to, insurance fraud under s. 817.234, patient
2061	brokering under s. 817.505, or kickbacks under s. 456.054,
2062	associated with a claim for medical payments coverage benefits
2063	in accordance with this section. An insurer prevailing in an
2064	action brought under this subsection may recover compensatory,
2065	consequential, and punitive damages subject to the requirements
2066	and limitations of part II of chapter 768 and attorney fees and
2067	costs incurred in litigating a cause of action against any
2068	person convicted of, or who, regardless of adjudication of
2069	guilt, pleads guilty or nolo contendere to, insurance fraud
2070	under s. 817.234, patient brokering under s. 817.505, or
2071	kickbacks under s. 456.054, associated with a claim for medical
2072	payments coverage benefits in accordance with this section.
2073	(7) FRAUD ADVISORY NOTICE.—Upon receiving notice of a claim
2074	under this section, an insurer shall provide a notice to the
2075	insured or to a person for whom a claim for reimbursement for
2076	diagnosis or treatment of injuries has been filed, advising
2077	that:
2078	(a) Pursuant to s. 626.9892, the department may pay rewards
2079	of up to \$25,000 to persons who provide information leading to
2080	the arrest and conviction of persons committing crimes
2081	investigated by the Division of Investigative and Forensic
2082	Services arising from violations of s. 440.105, s. 624.15, s.
2083	626.9541, s. 626.989, or s. 817.234.

(b) Solicitation of a person injured in a motor vehicle crash for purposes of filing medical payments coverage or tort claims could be a violation of s. 817.234, s. 817.505, or the rules regulating The Florida Bar and should be immediately reported to the Division of Investigative and Forensic Services

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if such conduct has taken place.

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- (8) NONREIMBURSABLE CLAIMS.—Claims generated as a result of activities that are unlawful pursuant to s. 817.505 are not reimbursable.
- (9) SECURE ELECTRONIC DATA TRANSFER.—A notice, documentation, transmission, or communication of any kind required or authorized under this section may be transmitted electronically if it is transmitted by secure electronic data transfer that is consistent with state and federal privacy and security laws.

Section 40. Subsections (1) and (7) of section 627.727, Florida Statutes, are amended, and present subsections (8), (9), and (10) of that section are redesignated as subsections (7), (8), and (9), respectively, to read:

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

(1) A No motor vehicle liability insurance policy that which provides bodily injury liability coverage may not shall be delivered or issued for delivery in this state with respect to any specifically insured or identified motor vehicle registered or principally garaged in this state, unless uninsured motor vehicle coverage is provided therein or supplemental thereto for the protection of persons insured thereunder who are legally entitled to recover damages from owners or operators of uninsured motor vehicles because of bodily injury, sickness, or disease, including death, resulting therefrom. However, the coverage required under this section is not applicable if when, or to the extent that, an insured named in the policy makes a written rejection of the coverage on behalf of all insureds

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597-01963-18 2018150c1 2118 under the policy. If When a motor vehicle is leased for a period 2119 of 1 year or longer and the lessor of such vehicle, by the terms 2120 of the lease contract, provides liability coverage on the leased 2121 vehicle, the lessee of such vehicle has shall have the sole privilege to reject uninsured motorist coverage or to select 2122 2123 lower limits than the bodily injury liability limits, regardless 2124 of whether the lessor is qualified as a self-insurer pursuant to 2125 s. 324.171. Unless an insured, or lessee having the privilege of 2126 rejecting uninsured motorist coverage, requests such coverage or 2127 requests higher uninsured motorist limits in writing, the 2128 coverage or such higher uninsured motorist limits need not be provided in or supplemental to any other policy which renews, 2129 2130 extends, changes, supersedes, or replaces an existing policy 2131 with the same bodily injury liability limits when an insured or 2132 lessee had rejected the coverage. When an insured or lessee has 2133 initially selected limits of uninsured motorist coverage lower 2134 than her or his bodily injury liability limits, higher limits of 2135 uninsured motorist coverage need not be provided in or 2136 supplemental to any other policy that which renews, extends, 2137 changes, supersedes, or replaces an existing policy with the 2138 same bodily injury liability limits unless an insured requests 2139 higher uninsured motorist coverage in writing. The rejection or 2140 selection of lower limits must shall be made on a form approved 2141 by the office. The form must shall fully advise the applicant of 2142 the nature of the coverage and must shall state that the 2143 coverage is equal to bodily injury liability limits unless lower 2144 limits are requested or the coverage is rejected. The heading of 2145 the form must shall be in 12-point bold type and must shall 2146 state: "You are electing not to purchase certain valuable

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597-01963-18 2018150c1 2147 coverage that which protects you and your family or you are 2148 purchasing uninsured motorist limits less than your bodily 2149 injury liability limits when you sign this form. Please read 2150 carefully." If this form is signed by a named insured, it will be conclusively presumed that there was an informed, knowing 2151 2152 rejection of coverage or election of lower limits on behalf of 2153 all insureds. The insurer shall notify the named insured at 2154 least annually of her or his options as to the coverage required 2155 by this section. Such notice must shall be part of, and attached 2156 to, the notice of premium, must shall provide for a means to 2157 allow the insured to request such coverage, and must shall be 2158 given in a manner approved by the office. Receipt of this notice 2159 does not constitute an affirmative waiver of the insured's right 2160 to uninsured motorist coverage if where the insured has not 2161 signed a selection or rejection form. The coverage described 2162 under this section must shall be over and above, but may shall 2163 not duplicate, the benefits available to an insured under any 2164 workers' compensation law, personal injury protection benefits, 2165 disability benefits law, or similar law; under any automobile 2166 medical payments expense coverage; under any motor vehicle 2167 liability insurance coverage; or from the owner or operator of 2168 the uninsured motor vehicle or any other person or organization 2169 jointly or severally liable together with such owner or operator 2170 for the accident; and such coverage must shall cover the 2171 difference, if any, between the sum of such benefits and the 2172 damages sustained, up to the maximum amount of such coverage 2173 provided under this section. The amount of coverage available 2174 under this section may shall not be reduced by a setoff against 2175 any coverage, including liability insurance. Such coverage does

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2176	shall not inure directly or indirectly to the benefit of any
2177	workers' compensation or disability benefits carrier or any
2178	person or organization qualifying as a self-insurer under any
2179	workers' compensation or disability benefits law or similar law.
2180	(7) The legal liability of an uninsured motorist coverage
2181	insurer does not include damages in tort for pain, suffering,
2182	mental anguish, and inconvenience unless the injury or disease
2183	is described in one or more of paragraphs (a) - (d) of s.
2184	627.737(2) .
2185	Section 41. Subsection (1) and paragraphs (a) and (b) of
2186	subsection (2) of section 627.7275, Florida Statutes, are
2187	amended to read:
2188	627.7275 Motor vehicle liability
2189	(1) A motor vehicle insurance policy providing personal
2190	injury protection as set forth in s. 627.736 may not be
2191	delivered or issued for delivery in this state $\underline{\text{for a}}$ with
2192	respect to any specifically insured or identified motor vehicle
2193	registered or principally garaged in this state <u>must provide</u>
2194	bodily injury liability coverage and unless the policy also
2195	provides coverage for property damage liability coverage as
2196	required $\underline{\text{under}}$ by s. 324.022, and medical payments coverage as
2197	required under s. 627.7265.
2198	(2)(a) Insurers writing motor vehicle insurance in this
2199	state shall make available, subject to the insurers' usual
2200	underwriting restrictions:
2201	1. Coverage under policies as described in subsection (1)
2202	to an applicant for private passenger motor vehicle insurance
2203	coverage who is seeking the coverage in order to reinstate the

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applicant's driving privileges in this state if the driving

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- 2. Coverage under policies as described in subsection (1), which includes bodily injury also provides liability coverage and property damage liability coverage for bodily injury, death, and property damage arising out of the ownership, maintenance, or use of the motor vehicle in an amount not less than the minimum limits required under described in s. 324.021(7) or s. 324.023 and which conforms to the requirements of s. 324.151, to an applicant for private passenger motor vehicle insurance coverage who is seeking the coverage in order to reinstate the applicant's driving privileges in this state after such privileges were revoked or suspended under s. 316.193 or s. 322.26(2) for driving under the influence.
- (b) The policies described in paragraph (a) <u>must shall</u> be issued for at least 6 months and, as to the minimum coverages required under this section, may not be canceled by the insured for any reason or by the insurer after 60 days, during which period the insurer is completing the underwriting of the policy. After the insurer has completed underwriting the policy, the insurer shall notify the Department of Highway Safety and Motor Vehicles that the policy is in full force and effect and is not cancelable for the remainder of the policy period. A premium <u>must shall</u> be collected and the coverage is in effect for the 60-day period during which the insurer is completing the underwriting of the policy, whether or not the person's driver license, motor vehicle tag, and motor vehicle registration are in effect. Once the noncancelable provisions of the policy

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2234	become effective, the bodily injury liability and property
2235	damage liability coverages for bodily injury, property damage,
2236	and personal injury protection may not be reduced below the
2237	minimum limits required under s. 324.021 or s. 324.023 during
2238	the policy period, and the medical payments coverage may not be
2239	reduced below the minimum limit required under s. 627.7265.
2240	Section 42. Paragraph (a) of subsection (1) of section
2241	627.728, Florida Statutes, is amended to read:
2242	627.728 Cancellations; nonrenewals
2243	(1) As used in this section, the term:
2244	(a) "Policy" means the bodily injury and property damage
2245	liability, personal injury protection, medical payments,
2246	comprehensive, collision, and uninsured motorist coverage
2247	portions of a policy of motor vehicle insurance delivered or
2248	issued for delivery in this state:
2249	1. Insuring a natural person as named insured or one or
2250	more related individuals $\underline{\text{who are residents}}\ \underline{\text{resident}}$ of the same
2251	household; and
2252	2. Insuring only a motor vehicle of the private passenger
2253	type or station wagon type which is not used as a public or
2254	livery conveyance for passengers or rented to others; or
2255	insuring any other four-wheel motor vehicle having a load
2256	capacity of 1,500 pounds or less which is not used in the
2257	occupation, profession, or business of the insured other than
2258	farming; other than any policy issued under an automobile
2259	insurance assigned risk plan or covering garage, automobile
2260	sales agency, repair shop, service station, or public parking
2261	place operation hazards.
2262	

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

Section 43. Subsection (1), paragraph (a) of subsection (5), and subsections (6) and (7) of section 627.7295, Florida Statutes, are amended to read:

627.7295 Motor vehicle insurance contracts.-

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

- (a) "Policy" means a motor vehicle insurance policy that provides bodily injury liability personal injury protection coverage, property damage liability coverage, and medical payments coverage or both.
- (b) "Binder" means a binder that provides motor vehicle bodily injury liability coverage, personal injury protection and property damage liability coverage, and medical payments coverage.
- (5) (a) A licensed general lines agent may charge a perpolicy fee up to not to exceed \$10 to cover the administrative costs of the agent associated with selling the motor vehicle insurance policy if the policy covers only bodily injury liability coverage, personal injury protection coverage as provided by s. 627.736 and property damage liability coverage, and medical payments coverage as provided by s. 627.7275 and if no other insurance is sold or issued in conjunction with or collateral to the policy. The fee is not considered part of the premium.
- (6) If a motor vehicle owner's driver license, license plate, and registration have previously been suspended pursuant to s. 316.646 or s. 627.733, an insurer may cancel a new policy

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only as provided in s. 627.7275. (7) A policy of private passenger motor vehicle insurance or a binder for such a policy may be initially issued in this state only if, before the effective date of such binder or policy, the insurer or agent has collected from the insured an amount equal to 2 months' premium from the insured. An insurer, agent, or premium finance company may not, directly or indirectly, take any action that results resulting in the

insured paying having paid from the insured's own funds an amount less than the 2 months' premium required by this subsection. This subsection applies without regard to whether the premium is financed by a premium finance company or is paid

pursuant to a periodic payment plan of an insurer or an insurance agent.

2306 (a) This subsection does not apply:

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 $\underline{1}$. If an insured or member of the insured's family is renewing or replacing a policy or a binder for such policy written by the same insurer or a member of the same insurer group. This subsection does not apply

 $\underline{2.}$ To an insurer that issues private passenger motor vehicle coverage primarily to active duty or former military personnel or their dependents. This subsection does not apply

3. If all policy payments are paid pursuant to a payroll deduction plan, an automatic electronic funds transfer payment plan from the policyholder, or a recurring credit card or debit card agreement with the insurer.

(b) This subsection and subsection (4) do not apply if:1. All policy payments to an insurer are paid pursuant to

2320 an automatic electronic funds transfer payment plan from an

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597-01963-18 2018150c1 2321 agent, a managing general agent, or a premium finance company 2322 and if the policy includes, at a minimum, bodily injury 2323 liability coverage, personal injury protection pursuant to ss. 627.730-627.7405; motor vehicle property damage liability 2324 2325 coverage, and medical payments coverage pursuant to s. 627.7275; 2326 or and bodily injury liability in at least the amount of \$10,000 2327 because of bodily injury to, or death of, one person in any one 2328 accident and in the amount of \$20,000 because of bodily injury 2329 to, or death of, two or more persons in any one accident. This 2330 subsection and subsection (4) do not apply if 2331 2. An insured has had a policy in effect for at least 6 2332

2. An insured has had a policy in effect for at least 6 months, the insured's agent is terminated by the insurer that issued the policy, and the insured obtains coverage on the policy's renewal date with a new company through the terminated agent.

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Section 44. Subsections (1) and (2) of section 627.7415, Florida Statutes, are amended to read:

627.7415 Commercial motor vehicles; additional liability insurance coverage.—Commercial motor vehicles, as defined in s. 207.002 or s. 320.01, operated upon the roads and highways of this state shall be insured with the following minimum levels of combined bodily liability insurance and property damage liability insurance under subsections (1) and (2) in addition to any other insurance requirements.÷

(1) Fifty thousand dollars per occurrence For a commercial motor vehicle with a gross vehicle weight of 26,000 pounds or more, but less than 35,000 pounds:

(a) Beginning January 1, 2019, through December 31, 2020, no less than \$50,000 per occurrence.

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2350	(b) Beginning January 1, 2021, through December 31, 2022,	
2351	no less than \$60,000 per occurrence.	
2352	(c) Beginning January 1, 2023, and thereafter, no less than	
2353	\$70,000 per occurrence.	
2354	(2) One hundred thousand dollars per occurrence For a	
2355	commercial motor vehicle with a gross vehicle weight of 35,000	
2356	pounds or more, but less than 44,000 pounds:	
2357	(a) Beginning January 1, 2019, through December 31, 2020,	
2358	no less than \$100,000 per occurrence.	
2359	(b) Beginning January 1, 2021, through December 31, 2022,	
2360	no less than \$120,000 per occurrence.	
2361	(c) Beginning January 1, 2023, and thereafter, no less than	
2362	\$140,000 per occurrence.	
2363		
2364	A violation of this section is a noncriminal traffic infraction,	
2365	punishable as a nonmoving violation as provided in chapter 318.	
2366	Section 45. Section 627.8405, Florida Statutes, is amended	
2367	to read:	
2368	627.8405 Prohibited acts; financing companies.— $\underline{\underline{A}}$ No premium	
2369	finance company shall, in a premium finance agreement or other	
2370	agreement, $\underline{\text{may not}}$ finance the cost of or otherwise provide for	
2371	the collection or remittance of dues, assessments, fees, or	
2372	other periodic payments of money for the cost of:	
2373	(1) A membership in an automobile club. The term	
2374	"automobile club" means a legal entity $\underline{\text{that}}$ which, in	
2375	consideration of dues, assessments, or periodic payments of	
2376	money, promises its members or subscribers to assist them in	
2377	matters relating to the ownership, operation, use, or	
2378	maintenance of a motor vehicle; however, $\underline{\text{the term}}$ $\underline{\text{this}}$	

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definition of "automobile club" does not include persons, associations, or corporations which are organized and operated solely for the purpose of conducting, sponsoring, or sanctioning motor vehicle races, exhibitions, or contests upon racetracks, or upon racecourses established and marked as such for the duration of such particular events. The term words "motor vehicle" used herein has have the same meaning as defined in chapter 320.

- (2) An accidental death and dismemberment policy sold in combination with a policy providing only medical payments coverage, bodily injury liability coverage, personal injury protection and property damage liability coverage only policy.
- (3) Any product not regulated under the provisions of this insurance code.

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

Section 46. Subsection (1) of section 627.915, Florida Statutes, is amended to read:

- 627.915 Insurer experience reporting.-
- (1) Each insurer transacting private passenger automobile insurance in this state shall report certain information annually to the office. The information will be due on or before July 1 of each year. The information must shall be divided into the following categories: bodily injury liability; property damage liability; uninsured motorist; personal injury protection

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2408	benefits; medical payments; and comprehensive and collision. The
2409	information given <u>must</u> shall be on direct insurance writings in
2410	the state alone and shall represent total limits data. The
2411	information set forth in paragraphs (a)-(f) is applicable to
2412	voluntary private passenger and Joint Underwriting Association
2413	private passenger writings and <u>must</u> shall be reported for each
2414	of the latest 3 calendar-accident years, with an evaluation date
2415	of March 31 of the current year. The information set forth in
2416	paragraphs (g)-(j) is applicable to voluntary private passenger
2417	writings and <u>must</u> shall be reported on a calendar-accident year
2418	basis ultimately seven times at seven different stages of
2419	development.
2420	(a) Premiums earned for the latest 3 calendar-accident
2421	years.
2422	(b) Loss development factors and the historic development
2423	of those factors.
2424	(c) Policyholder dividends incurred.
2425	(d) Expenses for other acquisition and general expense.
2426	(e) Expenses for agents' commissions and taxes, licenses,
2427	and fees.
2428	(f) Profit and contingency factors as utilized in the
2429	insurer's automobile rate filings for the applicable years.
2430	(g) Losses paid.
2431	(h) Losses unpaid.
2432	(i) Loss adjustment expenses paid.
2433	(j) Loss adjustment expenses unpaid.
2434	Section 47. Subsections (2) and (3) of section 628.909,
2435	Florida Statutes, are amended to read:
2436	628.909 Applicability of other laws

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2437	(2) The following provisions of the Florida Insurance Code		
2438	apply to captive insurance companies who are not industrial		
2439	insured captive insurance companies to the extent that such		
2440	provisions are not inconsistent with this part:		
2441	(a) Chapter 624, except for ss. 624.407, 624.408, 624.4085,		
2442	624.40851, 624.4095, 624.411, 624.425, and 624.426.		
2443	(b) Chapter 625, part II.		
2444	(c) Chapter 626, part IX.		
2445	(d) Sections 627.730-627.7405, when no-fault coverage is		
2446	provided.		
2447	(c) Chapter 628.		
2448	(3) The following provisions of the Florida Insurance Code		
2449	shall apply to industrial insured captive insurance companies to		
2450	the extent that such provisions are not inconsistent with this		
2451	part:		
2452	(a) Chapter 624, except for ss. 624.407, 624.408, 624.4085,		
2453	624.40851, 624.4095 , 624.411 , 624.425 , 624.426 , and $624.609(1)$.		
2454	(b) Chapter 625, part II, if the industrial insured captive		
2455	insurance company is incorporated in this state.		
2456	(c) Chapter 626, part IX.		
2457	(d) Sections 627.730-627.7405 when no-fault coverage is		
2458	provided.		
2459	(c) Chapter 628, except for ss. 628.341, 628.351, and		
2460	628.6018.		
2461	Section 48. Subsections (2), (6), and (7) of section		
2462	705.184, Florida Statutes, are amended to read:		
2463	705.184 Derelict or abandoned motor vehicles on the		
2464	premises of public-use airports		
2465	(2) The airport director or the director's designee shall		

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597-01963-18 2018150c1 2466 contact the Department of Highway Safety and Motor Vehicles to 2467 notify that department that the airport has possession of the 2468 abandoned or derelict motor vehicle and to determine the name 2469 and address of the owner of the motor vehicle, the insurance 2470 company insuring the motor vehicle, notwithstanding the 2471 provisions of s. 627.736_r and any person who has filed a lien on 2.472 the motor vehicle. Within 7 business days after receipt of the 2473 information, the director or the director's designee shall send 2474 notice by certified mail, return receipt requested, to the owner 2475 of the motor vehicle, the insurance company insuring the motor 2476 vehicle, notwithstanding the provisions of s. 627.736, and all 2.477 persons of record claiming a lien against the motor vehicle. The notice must shall state the fact of possession of the motor 2478 2479 vehicle, that charges for reasonable towing, storage, and 2480 parking fees, if any, have accrued and the amount thereof, that 2481 a lien as provided in subsection (6) will be claimed, that the lien is subject to enforcement pursuant to law, that the owner 2482 2483 or lienholder, if any, has the right to a hearing as set forth 2484 in subsection (4), and that any motor vehicle which, at the end 2485 of 30 calendar days after receipt of the notice, has not been 2486 removed from the airport upon payment in full of all accrued 2487 charges for reasonable towing, storage, and parking fees, if 2488 any, may be disposed of as provided in s. 705.182(2)(a), (b), 2489 (d), or (e), including, but not limited to, the motor vehicle 2490 being sold free of all prior liens after 35 calendar days after 2491 the time the motor vehicle is stored if any prior liens on the 2492 motor vehicle are more than 5 years of age or after 50 calendar 2493 days after the time the motor vehicle is stored if any prior 2494 liens on the motor vehicle are 5 years of age or less.

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- (6) The airport pursuant to this section or, if used, a licensed independent wrecker company pursuant to s. 713.78 shall have a lien on an abandoned or derelict motor vehicle for all reasonable towing, storage, and accrued parking fees, if any, except that no storage fee may shall be charged if the motor vehicle is stored less than 6 hours. As a prerequisite to perfecting a lien under this section, the airport director or the director's designee must serve a notice in accordance with subsection (2) on the owner of the motor vehicle, the insurance company insuring the motor vehicle, notwithstanding the provisions of s. 627.736, and all persons of record claiming a lien against the motor vehicle. If attempts to notify the owner, the insurance company insuring the motor vehicle, notwithstanding the provisions of s. 627.736, or lienholders are not successful, the requirement of notice by mail shall be considered met. Serving of the notice does not dispense with recording the claim of lien.
- (7) (a) For the purpose of perfecting its lien under this section, the airport shall record a claim of lien which $\underline{\text{states}}$ $\underline{\text{shall state}}$:
 - 1. The name and address of the airport.
- 2. The name of the owner of the motor vehicle, the insurance company insuring the motor vehicle, notwithstanding the provisions of s. 627.736, and all persons of record claiming a lien against the motor vehicle.
- 3. The costs incurred from reasonable towing, storage, and parking fees, if any.
- 4. A description of the motor vehicle sufficient for identification.

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2524	(b) The claim of lien $\underline{\text{must}}$ $\underline{\text{shall}}$ be signed and sworn to or
2525	affirmed by the airport director or the director's designee.
2526	(c) The claim of lien $\underline{\text{is}}$ shall be sufficient if it is in
2527	substantially the following form:
2528	
2529	CLAIM OF LIEN
2530	State of
2531	County of
2532	Before me, the undersigned notary public, personally appeared
2533	\ldots , who was duly sworn and says that he/she is the
2534	\ldots of \ldots , whose address is; and that the
2535	following described motor vehicle:
2536	(Description of motor vehicle)
2537	owned by, whose address is, has accrued
2538	\$ in fees for a reasonable tow, for storage, and for
2539	parking, if applicable; that the lienor served its notice to the
2540	owner, the insurance company insuring the motor vehicle
2541	notwithstanding the provisions of s. 627.736, Florida Statutes,
2542	and all persons of record claiming a lien against the motor
2543	vehicle on,(year), by
2544	(Signature)
2545	Sworn to (or affirmed) and subscribed before me this \dots day of
2546	\ldots , \ldots (year) \ldots , by \ldots (name of person making statement) \ldots
2547	(Signature of Notary Public)(Print, Type, or Stamp
2548	Commissioned name of Notary Public)
2549	Personally KnownOR Producedas identification.
2550	
2551	However, the negligent inclusion or omission of any information
2552	in this claim of lien which does not prejudice the owner does

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not constitute a default that operates to defeat an otherwise valid lien.

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- (d) The claim of lien must shall be served on the owner of the motor vehicle, the insurance company insuring the motor vehicle, notwithstanding the provisions of s. 627.736, and all persons of record claiming a lien against the motor vehicle. If attempts to notify the owner, the insurance company insuring the motor vehicle notwithstanding the provisions of s. 627.736, or lienholders are not successful, the requirement of notice by mail shall be considered met. The claim of lien must shall be so served before recordation.
- (e) The claim of lien must shall be recorded with the clerk of court in the county where the airport is located. The recording of the claim of lien shall be constructive notice to all persons of the contents and effect of such claim. The lien attaches shall attach at the time of recordation and takes shall take priority as of that time.

Section 49. Subsection (4) of section 713.78, Florida Statutes, is amended to read:

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

(4) (a) Any person regularly engaged in the business of recovering, towing, or storing vehicles or vessels who comes into possession of a vehicle or vessel pursuant to subsection (2), and who claims a lien for recovery, towing, or storage services, shall give notice to the registered owner, the insurance company insuring the vehicle notwithstanding the provisions of s. 627.736, and to all persons claiming a lien thereon, as disclosed by the records in the Department of

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of any corresponding agency in any other state in which the vehicle is identified through a records check of the National Motor Vehicle Title Information System or an equivalent commercially available system as being titled or registered.

- 2587 (b) If a Whenever any law enforcement agency authorizes the 2588 removal of a vehicle or vessel or if a whenever any towing 2589 service, garage, repair shop, or automotive service, storage, or 2590 parking place notifies the law enforcement agency of possession 2591 of a vehicle or vessel pursuant to s. 715.07(2)(a)2., the law 2592 enforcement agency of the jurisdiction where the vehicle or 2593 vessel is stored shall contact the Department of Highway Safety 2594 and Motor Vehicles, or the appropriate agency of the state of 2595 registration, if known, within 24 hours through the medium of 2596 electronic communications, giving the full description of the 2597 vehicle or vessel. Upon receipt of the full description of the vehicle or vessel, the department shall search its files to 2598 2599 determine the owner's name, the insurance company insuring the 2600 vehicle or vessel, and whether any person has filed a lien upon 2601 the vehicle or vessel as provided in s. 319.27(2) and (3) and 2602 notify the applicable law enforcement agency within 72 hours. 2603 The person in charge of the towing service, garage, repair shop, 2604 or automotive service, storage, or parking place shall obtain 2605 such information from the applicable law enforcement agency 2606 within 5 days after the date of storage and shall give notice 2607 pursuant to paragraph (a). The department may release the 2608 insurance company information to the requestor notwithstanding 2609 the provisions of s. 627.736.
 - (c) Notice by certified mail must shall be sent within 7

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

(d) If attempts to locate the name and address of the owner or lienholder prove unsuccessful, the towing-storage operator must shall, after 7 working days, excluding Saturday and Sunday, of the initial tow or storage, notify the public agency of jurisdiction where the vehicle or vessel is stored in writing by certified mail or acknowledged hand delivery that the towing-storage company has been unable to locate the name and address of the owner or lienholder and a physical search of the vehicle or vessel has disclosed no ownership information and a good faith effort has been made, including records checks of the Department of Highway Safety and Motor Vehicles database and the National Motor Vehicle Title Information System or an equivalent commercially available system. As used in For purposes of this paragraph and subsection (9), the term "good faith effort" means

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2640 that the following checks have been performed by the company to
2641 establish prior state of registration and for title:
2642 1. Check of the Department of Highway Safety and Motor
2643 Vehicles database for the owner and any lienholder.
2644 2. Check of the electronic National Motor Vehicle Title

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- 2. Check of the electronic National Motor Vehicle Title Information System or an equivalent commercially available system to determine the state of registration when there is not a current registration record for the vehicle on file with the Department of Highway Safety and Motor Vehicles.
- 4. Check of law enforcement report for tag number or other information identifying the vehicle or vessel, if the vehicle or vessel was towed at the request of a law enforcement officer.
- 5. Check of trip sheet or tow ticket of tow truck operator to see if a tag was on vehicle or vessel at beginning of tow, if private tow.
- 6. If there is no address of the owner on the impound report, check of law enforcement report to see if an out-of-state address is indicated from driver license information.
- 7. Check of vehicle or vessel for inspection sticker or other stickers and decals that may indicate a state of possible registration.
- 8. Check of the interior of the vehicle or vessel for any papers that may be in the glove box, trunk, or other areas for a state of registration.
 - 9. Check of vehicle for vehicle identification number.
 - 10. Check of vessel for vessel registration number.
 - 11. Check of vessel hull for a hull identification number

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which should be carved, burned, stamped, embossed, or otherwise permanently affixed to the outboard side of the transom or, if there is no transom, to the outmost seaboard side at the end of the hull that bears the rudder or other steering mechanism.

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Section 50. Paragraph (a) of subsection (1), paragraph (c) of subsection (7), paragraphs (a), (b), and (c) of subsection (8), and subsections (9) and (10) of section 817.234, Florida Statutes, are amended to read:

817.234 False and fraudulent insurance claims.-

- (1) (a) A person commits insurance fraud punishable as provided in subsection (11) if that person, with the intent to injure, defraud, or deceive any insurer:
- 1. Presents or causes to be presented any written or oral statement as part of, or in support of, a claim for payment or other benefit pursuant to an insurance policy or a health maintenance organization subscriber or provider contract, knowing that such statement contains any false, incomplete, or misleading information concerning any fact or thing material to such claim;
- 2. Prepares or makes any written or oral statement that is intended to be presented to <u>an</u> any insurer in connection with, or in support of, any claim for payment or other benefit pursuant to an insurance policy or a health maintenance organization subscriber or provider contract, knowing that such statement contains any false, incomplete, or misleading information concerning any fact or thing material to such claim;
- 3.a. Knowingly presents, causes to be presented, or prepares or makes with knowledge or belief that it will be presented to an any insurer, purported insurer, servicing

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597-01963-18 2018150c1 2698 corporation, insurance broker, or insurance agent, or any 2699 employee or agent thereof, any false, incomplete, or misleading 2700 information or a written or oral statement as part of, or in 2701 support of, an application for the issuance of, or the rating 2702 of, any insurance policy, or a health maintenance organization 2703 subscriber or provider contract; or 2704 b. Knowingly conceals information concerning any fact 2705 material to such application; or 2706 4. Knowingly presents, causes to be presented, or prepares 2707 or makes with knowledge or belief that it will be presented to 2708 any insurer a claim for payment or other benefit under medical payments coverage in a motor vehicle a personal injury 2709 2710 protection insurance policy if the person knows that the payee 2711 knowingly submitted a false, misleading, or fraudulent 2712 application or other document when applying for licensure as a 2713 health care clinic, seeking an exemption from licensure as a health care clinic, or demonstrating compliance with part X of 2714 2715 chapter 400. 2716 (7) 2717 (c) An insurer, or any person acting at the direction of or 2718 on behalf of an insurer, may not change an opinion in a mental 2719 or physical report prepared under s. 627.736(7) or direct the 2720 physician preparing the report to change such opinion; however, 2721 this provision does not preclude the insurer from calling to the 2722 attention of the physician errors of fact in the report based 2723 upon information in the claim file. Any person who violates this 2724 paragraph commits a felony of the third degree, punishable as 2725 provided in s. 775.082, s. 775.083, or s. 775.084.

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(8) (a) It is unlawful for any person intending to defraud

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

- (b) A person may not solicit or cause to be solicited any business from a person involved in a motor vehicle accident by any means of communication other than advertising directed to the public for the purpose of making motor vehicle tort claims or claims for benefits under medical payments coverage in a motor vehicle insurance policy personal injury protection benefits required by s. 627.736, within 60 days after the occurrence of the motor vehicle accident. Any person who violates this paragraph commits a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.
- (c) A lawyer, health care practitioner as defined in s. 456.001, or owner or medical director of a clinic required to be licensed pursuant to s. 400.9905 may not, at any time after 60 days have elapsed from the occurrence of a motor vehicle accident, solicit or cause to be solicited any business from a person involved in a motor vehicle accident by means of in person or telephone contact at the person's residence, for the purpose of making motor vehicle tort claims or claims for

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2756	benefits under medical payments coverage in a motor vehicle
2757	insurance policy personal injury protection benefits required by
2758	s. 627.736. Any person who violates this paragraph commits a
2759	felony of the third degree, punishable as provided in s.
2760	775.082, s. 775.083, or s. 775.084.
2761	(9) A person may not organize, plan, or knowingly
2762	participate in an intentional motor vehicle crash or a scheme to
2763	create documentation of a motor vehicle crash that did not occur
2764	for the purpose of making motor vehicle tort claims or claims
2765	for benefits under medical payments coverage in a motor vehicle
2766	insurance policy personal injury protection benefits as required
2767	by s. 627.736. Any person who violates this subsection commits a
2768	felony of the second degree, punishable as provided in s.
2769	775.082, s. 775.083, or s. 775.084. A person who is convicted of
2770	a violation of this subsection shall be sentenced to a minimum
2771	term of imprisonment of 2 years.
2772	(10) A licensed health care practitioner who is found
2773	guilty of insurance fraud under this section for an act relating
2774	to a <u>motor vehicle</u> personal injury protection insurance policy
2775	loses his or her license to practice for 5 years and may not
2776	receive reimbursement under medical payments coverage in a motor
2777	vehicle insurance policy for personal injury protection benefits
2778	for 10 years.
2779	Section 51. Applicability and construction; notice to
2780	<pre>policyholders</pre>
2781	(1) As used in this section, the term "minimum security
2782	requirements" means security that enables a person to respond in
2783	damages for liability on account of crashes arising out of the
2784	ownership, maintenance, or use of a motor vehicle in the amounts

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597-01963-18 2018150c1 2785 required by s. 324.021(7), Florida Statutes. 2786 (2) Effective January 1, 2019: 2787 (a) Motor vehicle insurance policies issued or renewed on or after that date may not include personal injury protection. 2788 2789 (b) All persons subject to s. 324.022, s. 324.032, s. 627.7415, or s. 627.742, Florida Statutes, must maintain at 2790 2791 least minimum security requirements. 2792 (c) Any new or renewal motor vehicle insurance policy 2793 delivered or issued for delivery in this state must provide 2794 coverage that complies with minimum security requirements. 2795 (d) Any new or renewal motor vehicle insurance policy 2796 furnished to an owner or operator of a motor vehicle as proof of 2797 financial responsibility pursuant to s. 324.022 or s. 324.031, 2798 Florida Statutes, must provide medical payments coverage that 2799 complies with s. 627.7265, Florida Statutes. 2800 (e) An existing motor vehicle insurance policy issued

(e) An existing motor vehicle insurance policy issued before that date which provides personal injury protection and property damage liability coverage that meets the requirements of s. 324.022, Florida Statutes, on December 31, 2018, but which does not meet minimum security requirements on or after January 1, 2019, is deemed to meet the security requirements of s. 324.022, Florida Statutes, and the medical payments coverage requirements of s. 627.7265, Florida Statutes, until such policy is renewed, nonrenewed, or canceled on or after January 1, 2019.

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(3) Each insurer shall allow each insured who has a new or renewal policy providing personal injury protection, which becomes effective before January 1, 2019, and whose policy does not meet minimum security requirements on or after January 1, 2019, to change coverages so as to eliminate personal injury

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2814	protection and obtain coverage providing minimum security
2815	requirements, which shall be effective on or after January 1,
2816	2019. The insurer is not required to provide coverage complying
2817	with minimum security requirements in such policies if the
2818	insured does not pay the required premium, if any, by January 1,
2819	2019, or such later date as the insurer may allow. Any reduction
2820	in the premium must be refunded by the insurer. The insurer may
2821	not impose on the insured an additional fee or charge that
2822	applies solely to a change in coverage; however, the insurer may
2823	charge an additional required premium that is actuarially
2824	indicated.
2825	(4) By September 1, 2018, each motor vehicle insurer shall
2826	provide notice of this section to each motor vehicle
2827	policyholder who is subject to this section. The notice is
2828	subject to approval by the Office of Insurance Regulation and
2829	must clearly inform the policyholder that:
2830	(a) The Florida Motor Vehicle No-Fault Law is repealed,
2831	effective January 1, 2019, and that on or after that date, the
2832	insured is no longer required to maintain personal injury
2833	protection insurance coverage, that personal injury protection
2834	coverage is no longer available for purchase in this state, and
2835	that all new or renewal policies issued on or after that date do
2836	not contain such coverage.
2837	(b) Effective January 1, 2019, a person subject to the
2838	financial responsibility requirements of s. 324.022, Florida
2839	Statutes, must maintain minimum security requirements that
2840	enable the person to respond in damages for liability on account
2841	of accidents arising out of the use of a motor vehicle in the
2842	following amounts:

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2843	1. Beginning January 1, 2019, and continuing through
2844	December 31, 2020:
2845	a. Twenty thousand dollars for bodily injury to, or the
2846	death of, one person in any one crash and, subject to such
2847	limits for one person, in the amount of \$40,000 for bodily
2848	injury to, or the death of, two or more persons in any one
2849	crash; and
2850	b. Ten thousand dollars for damage to, or destruction of,
2851	the property of others in any one crash.
2852	2. Beginning January 1, 2021, and continuing through
2853	December 31, 2022:
2854	a. Twenty-five thousand dollars for bodily injury to, or
2855	the death of, one person in any one crash and, subject to such
2856	limits for one person, in the amount of \$50,000 for bodily
2857	injury to, or the death of, two or more persons in any one
2858	crash; and
2859	b. Ten thousand dollars for damage to, or destruction of,
2860	the property of others in any one crash.
2861	3. Beginning January 1, 2023, and continuing thereafter:
2862	a. Thirty thousand dollars for bodily injury to, or the
2863	death of, one person in any one crash and, subject to such
2864	limits for one person, in the amount of \$60,000 for bodily
2865	injury to, or the death of, two or more persons in any one
2866	crash; and
2867	b. Ten thousand dollars for damage to, or destruction of,
2868	the property of others in any one crash.
2869	(c) Personal injury protection insurance paid covered
2870	medical expenses for injuries sustained in a motor vehicle crash
2871	by the policyholder, passengers, and relatives residing in the

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2872	<pre>policyholder's household.</pre>	
2873	(d) Bodily injury liability coverage protects the insured,	
2874	up to the coverage limits, against loss if the insured is	
2875	legally responsible for the death of or bodily injury to others	
2876	in a motor vehicle accident.	
2877	(e) Effective January 1, 2019, a person who purchases a	
2878	motor vehicle liability insurance policy as proof of financial	
2879	responsibility must maintain medical payments coverage that	
2880	complies with s. 627.7265, Florida Statutes. Medical payments	
2881	coverage pays covered medical expenses, up to the limits of such	
2882	coverage, for injuries sustained in a motor vehicle crash by the	
2883	policyholder, passengers, and relatives residing in the	
2884	policyholder's household, as provided in s. 627.7265, Florida	
2885	Statutes. Medical payments coverage also provides a death	
2886	benefit of at least \$5,000. Medical payments coverage reimburses	
2887	fewer medical services and care than were reimbursable under	
2888	personal injury protection. Medical payments coverage provides	
2889	reimbursement for the following if medically necessary and if an	
2890	individual initially receives such treatment within 14 days	
2891	after the motor vehicle accident:	
2892	1. Emergency transportation and treatment.	
2893	2. Emergency services and care provided by a hospital.	
2894	3. Emergency services and care provided by a licensed	
2895	physician or licensed dentist in a hospital, ambulatory surgical	
2896	center, or mobile surgical facility licensed under chapter 395,	
2897	Florida Statutes, and related hospital inpatient care.	
2898	4. Hospital inpatient services, other than emergency	
2899	services and care.	
2900	5. Hospital outpatient services, other than emergency	

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2901 services and care.

- (f) The policyholder may obtain underinsured motorist coverage, which provides benefits, up to the limits of such coverage, to a policyholder or other insured entitled to recover damages for bodily injury, sickness, disease, or death resulting from a motor vehicle accident with an uninsured or underinsured owner or operator of a motor vehicle.
- (g) If the policyholder's new or renewal motor vehicle insurance policy is effective before January 1, 2019, and contains personal injury protection and property damage liability coverage as required by state law before January 1, 2019, but does not meet minimum security requirements on or after January 1, 2019, the policy is deemed to meet minimum security requirements until it is renewed, nonrenewed, or canceled on or after January 1, 2019.
- (h) A policyholder whose new or renewal policy becomes effective before January 1, 2019, but does not meet minimum security requirements on or after January 1, 2019, may change coverages under the policy so as to eliminate personal injury protection and to obtain coverage providing minimum security requirements, including bodily injury liability coverage, which are effective on or after January 1, 2019.
- (i) If the policyholder has any questions, he or she should contact the person named at the telephone number provided in the notice.
- (5) This section takes effect upon this act becoming a law.

 Section 52. Application of suspensions for failure to

 maintain security; reinstatement.—All suspensions for failure to

 maintain required security as required by law in effect before

Page 101 of 102

 ${\tt CODING:}$ Words ${\tt stricken}$ are deletions; words ${\tt \underline{underlined}}$ are additions.

Florida Senate - 2018 CS for SB 150

2018150c1

January 1, 2019, remain in full force and effect after January
1, 2019. A driver may reinstate a suspended driver license or
registration as provided under s. 324.0221, Florida Statutes.
Section 53. Except as otherwise expressly provided in this
act and except for this section, which shall take effect upon
this act becoming a law, this act shall take effect January 1,
2019.

597-01963-18

Page 102 of 102



The Florida Senate

Committee Agenda Request

Senator Anitere Flores, Chair Appropriations Subcommittee on Health and Human Services	
Subject: Committee Agenda Request	
Date: January 10 th , 2018	
I respectfully the:	request that Senate Bill #150 , relating to Motor Vehicle Insurance , be placed on
	committee agenda at your earliest possible convenience.
\boxtimes	next committee agenda.

Senator Tom Lee

Florida Senate, District 20

APPEARANCE RECORD

(Deliver BOTH copies of this form to the Sena	ator or Senate Professional Staff conducting the meeting)
Meeting Date	Bill Number, (if applicable)
Topic PIP repeal	(A) 2/6/38
	Amendment Barcode (if applicable)
Name_ Kon Wotson	
Job Title holdayist	
Address 3738 Minder Way	Phone 850 567-1202
Street Tallahava Tity State	32309 Email Watson, stritegies
Speaking: For Against Information	Waive Speaking: In Support Against
Representing Florida Chiropudic	(The Chair will read this information into the record.)
Appearing at request of Chair: Yes No	Lobbyist registered with Legislature: Yes No
While it is a Canata tradition to anacymera mublic testimes "	

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

APPEARANCE RECORD

2/28/2018 (Deliver BOTH copies of this form to the Senator of	or Senate Professional Staff conducting the meeting)
Meeting Date	Bill Number (if applicable)
Topic Mater Vehicle Insurance	Amendment Barcode (if applicable)
Name Date Swope	
Job Title President	
Address 218 5. Monroe St.	Phone
Street FL	32301 Email
Speaking: For Against Information	Zip Waive Speaking: In Support Against (The Chair will read this information into the record.)
Representing Florida Justice As	550Cjatar
	Lobbyist registered with Legislature: Yes No
	*

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

APPEARANCE RECORD

2 28 18	copies of this form to the Senato	or or Senate Professional	Staff conducting the meeting)	150
Meeting Date				Bill Number (if applicable)
Topic Insuranu			Amend	ment Barcode (if applicable)
Name BRAD NAIL			_	
Job Title SR, RISH & PUBLIC	POLICY MANAGET	M	_	
Address 1717 Rhody Klass A	M NW		Phone 417-68	0 5071
Washington City	State	22201 Zip	Email naile	uber.com
Speaking: For Against	Information	Waive S	Speaking: In Supair will read this informa	port Against tion into the record.)
Representing UBER				
Appearing at request of Chair:	Yes 🔀 No	Lobbyist regis	tered with Legislatu	re: 🔀 Yes 🗌 No
While it is a Senate tradition to encourage meeting. Those who do speak may be a	ge public testimony, timesked to limit their rema	e may not permit a rks so that as many	ll persons wishing to sp persons as possible c	eak to be heard at this an be heard.
This form is part of the public record	for this meeting.			S-001 (10/14/14)

APPEARANCE RECORD

2/28//8 (Deliver BOTH copies of this form to the Senator or Senate Professional S	Staff conducting the meeting)	150
Meeting Date		Bill Number (if applicable)
Topic PIP	Amend	ment Barcode (if applicable)
Name Mac Phillips	-	
Job Title Attorney		
Address 212 56 8 St., Ste. 103	Phone 954-6	642-8885
	Email mphille	psaphillipstator.a
	peaking: In Supir will read this informa	
Representing Florilians for fair Inswance, In	.C.	
Appearing at request of Chair: Yes No Lobbyist regist	ered with Legislatu	ıre: Yes No
While it is a Senate tradition to encourage public testimony, time may not permit all meeting. Those who do speak may be asked to limit their remarks so that as many	persons wishing to sp persons as possible c	eak to be heard at this an be heard.
This form is part of the public record for this meeting.		S-001 (10/14/14)

APPEARANCE RECORD

	APPEARANCE RECORD
1/18/2018	(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)
Macting Data	

Bill Number (if applicable)

Meeting Date	Bill Number (if applicable)
Topic Motor Vehice Insurance	Amendment Barcode (if applicable)
Name David Altmaier	
Job Title Insurance Commissioner	_
Address Zoo E Grainus St Street	Phone
Tallahassee FL City State	Email
Speaking: For X Against Information	Waive Speaking: In Support Against (The Chair will read this information into the record.)
Representing Florida Office of	Insurance Regulation
Appearing at request of Chair: Yes No	Lobbyist registered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

APPEARANCE RECORD

2/28//8 (Deliver BOTH copies of this form to the Senator or Senate Profession Meeting Date	ional Staff conducting the meeting) Bill Number (if applicable)
Topic Bodily Injury / PIP	Amendment Barcode (if applicable)
Name Doug Bell	
Job Title	
Address 19 5. Monroe 54	Phone 205-9000
TLH	Email doug help unhafirm. com
City State Zip	
	ve Speaking: In Support Against Chair will read this information into the record.)
Representing <u>Progressive</u> Insurance Co.	
Appearing at request of Chair: Yes No Lobbyist re	egistered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

APPEARANCE RECORD

Meeting Date (Deliver BOTH copies of this form to the Senator or Se	enate Professional Staff conducting the meeting) Bill Number (if applicable)
Topic PIP	Amendment Barcode (if applicable)
Name STUART KOENIGSBER	LG_
Job Title ATTORNEY	
Address 8877 SW 131 St St.	Phone 305-899-8900
MiAMI FL	==== stumt@ Email Koenigsberglan.com
Speaking: For Against Information	Zip Waive Speaking: In Support Against (The Chair will read this information into the record.)
Representing SOLOG FLORIDIANS FOR	FAIR INSULANCE
Appearing at request of Chair: Yes No Lo	bbyist registered with Legislature: Yes No
While it is a Senate tradition to encourage public testimony, time management meeting. Those who do speak may be asked to limit their remarks so	y not permit all persons wishing to speak to be heard at this o that as many persons as possible can be heard.

S-001 (10/14/14)

This form is part of the public record for this meeting.

APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

· 	
Meeting Date	Bill Number (if applicable)
Topic Repeal PIP Name Christine Rodriguez	Amendment Barcode (if applicable)
Job Title	
Address 11425 Crescent Pines BlvD	Phone 352-874-500Z
Chermont FL 34711	Email
Speaking: For Against Information Waive Speaking: Against Information Waive Speaking: Against Information Waive Speaking: Waiv	peaking: In Support Against ir will read this information into the record.)
Appearing at request of Chair: Yes No Lobbyist register	ered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

APPEARANCE RECORD

2/28/18 (Deliver BOTH copies of this form to the Senator or Senate Professional State Meeting Date	aff conducting the meeting) SB 150 Bill Number (if applicable)
Topic PIP	Amendment Barcode (if applicable)
Name Gary GUZZO	
Job Title Lobbyist	
Address 108 S Monroe St.	Phone (850) 681-0024
	Email ag UZZO @ flapa peaking: In Support Against
Representing US Chamber Institute f	or Legal Reform
Appearing at request of Chair: Yes No Lobbyist register	ered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons **a**s possible can be heard.

This form is part of the public record for this meeting.

APPEARANCE RECORD

2/28/18 (Deliver BOTH copies of this form to the Senator	or Senate Professional Staff		SB 150
Meeting Date		E	Bill Number (if applicable)
Topic		Amendme	ent Barcode (if applicable)
Name Jeff Scott			
Job Title			
Address 1430 Piedmont Dr. E.		Phone 850 724	-6496
Talkha ssee PL	32308	Email is offe	flmedical.org
Speaking: State Speaking: Against Information	کاب Waive Spe	aking: In Suppose In S	port Against
Representing Florida Medical Associa	ation		
Appearing at request of Chair: Yes No	Lobbyist register	ed with Legislatur	e: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting) 2/28/18 150 Meeting Date Bill Number (if applicable) Topic PIP Repeal Amendment Barcode (if applicable) Name Michael Carlson Job Title President Address 215 S. Monroe St. Ste. 835 Phone 850-597-7425 Street Tallahassee FL Email michael.carlson@piff.net 32312 City State Zip For Against Speaking: Information Waive Speaking: In Support (The Chair will read this information into the record.) The Personal Insurance Federation of Florida Lobbyist registered with Legislature: Appearing at request of Chair:

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

APPEARANCE RECORD

2/28/10	(Deliver BOTH copies of this form to the Senator	or Senate Professional St	taff conducting the meeting)	150
Meeting Date				Bill Number (if applicable)
Topic			Amend	ment Barcode (if applicable)
Name Corcha	- Anthony - Un	1.th		
Job Title AHOV	ney	,		
Address <u>5401</u>	. Kirkman Ro	λ,	Phone (407	299-8589
Street	ndo Fl	32819	Email	
City	State	Zip		
Speaking: For	Against Information	Waive Sp	peaking:In Su	pport Against
Representing	elf	(The Chai	r will read this informa	tion into the record.)
Appearing at request of	f Chair: Yes No	Lobbyist registe	ered with Legislatu	re: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

APPEARANCE RECORD

Deliver BOTH copies of this form to the Senator or Senate Professional S Meeting Date (Deliver BOTH copies of this form to the Senator or Senate Professional S	staff conducting the meeting) 150 Bill Number (if applicable)
Topic PIP	Amendment Barcode (if applicable)
Name Melisa Coyle	, ,,
Job Title Attorney	
Address 407 Lincoln Rd, 5k 8-E	Phone 305 - 604 - 0077
Miani Beach, FC 33/39 City State Zip	Email May le @ the coylelawfirm
Speaking: For Against Information Waive Speaking: (The Cha	peaking: In Support Against ir will read this information into the record.)
Representing Floridians for Fair Insura	nce
Appearing at request of Chair: Yes No Lobbyist regist	ered with Legislature: Yes No
While it is a Senate tradition to encourage public testimony, time may not permit all meeting. Those who do speak may be asked to limit their remarks so that as many	persons wishing to speak to be heard at this persons as possible can be heard.
This form is part of the public record for this meeting.	S-001 (10/14/14)

APPEARANCE RECORD

2/28/17 Meeting Date	HB19/SB150 Bill Number (if applicable)
Topic Motor Vehicle Insurance	Amendment Barcode (if applicable)
Name Alyson Laderman	
Job Title Attorney Mediator	
Address 940 Centre Circle, Ste 3002	Phone 407-512-4394
Altamonte Springs FL 32714 City State Zip Speaking: For X Against Information Waive Springs FL 32714	Email <u>a ader mas Che or lando</u> Tawgroup. esm peaking: In Support Against r will read this information into the record.)
Representing	
Appearing at request of Chair: Yes No Lobbyist register	ered with Legislature: Yes No
While it is a Senate tradition to encourage public testimony, time may not permit all meeting. Those who do speak may be asked to limit their remarks so that as many	persons wishing to speak to be heard at this persons a s possible can be heard.

S-001 (10/14/14)

This form is part of the public record for this meeting.

APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting) Meeting Date Bill Number (if applicable) Amendment Barcode (if applicable) Address Street Email (State Speaking: Information Waive Speaking: In Support (The Chair will read this information into the record.) Representing 125120-1 Lobbyist registered with Legislature: Appearing at request of Chair: Yes

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

APPEARANCE RECORD

2/28/18 Meeting Date (Deliver BOTH copies of this form to the Senator	or or Senate Professional Staff conducting the meeting) 150 Bill Number (if applicable)
Topic BI/ PIP	Amendment Barcode (if applicable)
Name Doug Bell	
Job Title	
Address 195. Montoe	Phone 205 9000
City State	Email doug, bell and firm. Com
Speaking: For Against Information	Waive Speaking: In Support Against (The Chair will read this information into the record.)
Representing Avis Budget Group	Rental Cass
Appearing at request of Chair: Yes No	Lobbyist registered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

APPEARANCE RECORD

2 28 (Deliver BOTH copies of this form to the Senator or Senate Professional Sta	aff conducting the meeting) SB 150
Meeting Date	Bill Number (if applicable)
Topic Motor Vehide Insurance	Amendment Barcode (if applicable)
Name Dawn Brown - Cross, P.T., MBA., EdD., C	LT
Job Title	
Address 800 N. Calhan Street # Ja	Phone 850-222-1243
Address 800 N. Calhan Street # fa Street Tallahussee FC 32303	Email
Speaking: For Against Information Waive Sp	eaking: In Support Against will read this information into the record.)
Representing Florida Physical therapy A	issociation
Appearing at request of Chair: Yes No Lobbyist registe	ered with Legislature: Yes No
While it is a Senate tradition to encourage public testimony, time may not permit all r	persons wishing to speak to be heard at this

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

02.28.18	8			150
Mee	ting Date			Bill Number (if applicable)
Topic M	lotor Vehicle Insurance		<u></u>	Amendment Barcode (if applicable
Name R	ick Parker			_
Job Title				_
Address	3600 Maclay Blvd.			Phone 850-894-4111
	Tallahassee	FL	32312	Email jparker@butler.legal
Speaking	City For ✓ Against	State Information		Speaking: In Support Against air will read this information into the record.)
Repre	esenting Florida Justice	Reform Institute		
Appearin	ng at request of Chair:	Yes No	Lobbyist regis	tered with Legislature: Yes No
		• .	-	Il persons wishing to speak to be heard a t this y persons as possible can be heard.

This form is part of the public record for this meeting.

APPEARANCE RECORD

Meeting Date	Bill Number (if applicable)
Topic <u>Auto Insurance</u>	Amendment Barcode (if applicable)
Name Kim Driggers	-
Job Title	_
Address 3770 Piney Grae Dr.	Phone 850 - 597 - 1355
Street 72/1/ City State 323/1 Zip	Email Karigger Edriggers - 120
	peaking: In Support Against air will read this information into the record.)
Representing Florida Chiropractic ASSI	И.
Appearing at request of Chair: Yes No Lobbyist regist	tered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

APPEARANCE RECORD

Deliver BOTH copies of this form to the Senator or Senate Professional Sta	aff conducting the meeting)
Meeting Date	Bill Number (if applicable)
Topic Speak on Bill	Amendment Barcode (if applicable)
Name Meenan	
Job Title Address 300 5. DVA 5+.	Phone (850)425-4000
Street City State State State	Email Tima Menyngutima
Speaking: For Against Information Waive Sp	peaking: In Support Against r will read this information into the record.)
Representing National Association of Insulance France	cal Advisus - Flora
Appearing at request of Chair: Yes No Lobbyist register	ered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons **as** possible can be heard.

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APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional S	Staff conducting the meeting) 5/3/50
Meeting Date	Bill Number (if applicable)
Topic	Amendment Barcode (if applicable
Name Ceslie Dughi	- -
Job Title	_
Address	Phone
City State Zip	Email dughila gtlan
Speaking: For Against Information Waive S	peaking: In Support Against ir will read this information into the record.)
Representing Enterprise Mational an	d Alamo
Appearing at request of Chair: Yes No Lobbyist regist	ered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional S	taff conducting the meeting)
Meeting Date	Bill Number (if applicable)
Topic PIP	Amendment Barcode (if applicable)
Name KYLE ULRICH	
Job Title SVP	
Address 3159 SHAMROCK S. Street	Phone 850-893-4155
TALLAHASSEE FL 32309	Email KULRICH @ FAIR, COM
	peaking: In Support Against ir will read this information into the record.)
Representing FL. ASSOC. OF INSURANCE AG	ENTS
Appearing at request of Chair: Yes No Lobbyist register	ered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons **a**s possible can be heard.

This form is part of the public record for this meeting.

APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional	Staff conducting the meeting) $SR/50$
Meeting Date	Bill Number (if applicable)
Topic Asto Ins	Amendment Barcode (if applicable)
Name Mark Delegal	_
Job Title Refained Counsel	_
Address 3/5 S. Calhoun St	Phone 850 224-7000
Tallahassee FL 32301	_ Email
City State Zip	
	Speaking: In Support Against air will read this information into the record.)
Representing State Farm Mutual	Auto. Ins Co.
Appearing at request of Chair: Yes No Lobbyist regis	stered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

APPEARANCE RECORD

Meeting Date (Deliver BOTH copies of this form to the Senator	Bill Number (if applicable)
Topic Motor Vehicle Insuran	Amendment Barcode (if applicable)
Name Dale Swope	
Job Title President	
Address 2185. Monroe St.	Phone
Tallahussee FL	32301 Email
Speaking: State Against Information	Waive Speaking: In Support Against (The Chair will read this information into the record.)
Representing Florida Justice	Association
Appearing at request of Chair: Yes X No	Lobbyist registered with Legislature: Yes X No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons **as** possible can be heard.

This form is part of the public record for this meeting.

APPEARANCE RECORD

2/25/17 (Deliver BOTH copies of this form to the S	enator or Senate Professional Staff of	conducting the meeting)	150
Meeting Date		-	Bill Number (if applicable)
Topic Motor Vehicle Insurcence		Amendm	nent Barcode (if applicable)
Name Carolyn Johnson		-	. ,, ,
Job Title Policey Divector			
Address 136 S British St.	P	Phone 850-5	21-1200
Tallahassee FL City State	3030\	imail Ciohns	reperember
Speaking: For Against Information	Waive Spea	king: In Suppill read this information	oort Against ion into the record.)
Representing FL Chamber of Co	mmerce		
Appearing at request of Chair: Yes No	Lobbyist registere	d with Legislatur	e: Ves No
While it is a Senate tradition to encourage public testimony, meeting. Those who do speak may be asked to limit their re	time may not permit all per emarks so that as many pers	rsons wishing to spe rsons as possible ca	ak to be heard at this n be heard.
This form is part of the public record for this meeting.			S-001 (10/14/14)

APPEARANCE RECORD

228 19 (Deliver BOTH copies of this form to the Senator or Senate Pro	fessional Staff conducting the meeting)
Meeling Date	Bill Number (if applicable)
Topic PIP Repeal	Amendment Barcode (if applicable)
Name Lagan Mctaddin	
Job Title Regional Manager	
Address 215 S. Monroe St. Suite 770	Phone <u>950</u> 68) 2615
Tallalasaal FL 3230	Email logan mofaddin poiaz net
	Vaive Speaking: In Support Against The Chair will read this information into the record.)
Representing Property Casualty Insurers A	tssoc. of America (PCI)
/	t registered with Legislature: Yes No
While it is a Senate tradition to encourage public testimony, time may not permeeting. Those who do speak may be asked to limit their remarks so that a	ermit all persons wishing to speak to be heard at this as many persons as possible can be heard.

This form is part of the public record for this meeting.

APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting) Bill Number (if applicable) Amendment Barcode (if applicable) Address Street City State Zip Information Waive Speaking: In Support (The Chair will read this information into the record.) Appearing at request of Chair: Lobbyist registered with Legislature:

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

APPEARANCE RECORD

	TEARANGE	REGUN		
9/28/1	is form to the Senator or Sena	ate Professional Stat	ff conducting the meeting)50.
Meeting Date			(A)	Bill Number (if applicable)
Topic PIP repeal			The state of the s	71509
Topic Tall I decor			Amei	ndment Barcode (if applicable)
Name Kon Watson				
Job Title Lobbyist				
Address 3738 Mundon W)ay		Phone <u>850</u>	567-1202
Tallana See	FC 3		Email Watson	. Strategieso (om Cas
City	State State	Zip		not
Speaking: For Against Inf	ormation		eaking: In S	
, , ,	i Oi	da da	•	mation into the record.)
Representing Florida Chiro	pudic Phys	sician F	toxiation	
Appearing at request of Chair: Yes		byist registe	red with Legisla	ture: Yes No
W// 11 11 11 11 11 11 11 11 11 11 11 11 1				

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional St	taff conducting the meeting)
Meeting Date	Bill Number (if applicable)
Topic Motor Vehicle Insurance	Amendment Barcode (if applicable)
Name_Date_Swope_	
Job Title President	
Address 218 5, Monroe St	Phone
Street Talla FL 3230/	Email
Speaking: State Sip Speaking: Against Information Waive Signature City Waive Signature Chair State Zip Waive Signature Chair (The Chair	peaking: In Support Against ir will read this information into the record.)
Representing Florida Justice Association	
Appearing at request of Chair: Yes No Lobbyist register	ered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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APPEARANCE RECORD

	or Senate Professional Staff conducting the meeting)
Meeting Date	Bill Number (if applicable)
Topic	37/248
TOPIC	Amendment Barcode (if applicable)
Name Chris Nuland	
Job Title	
Address 600 Riverside Au #240	Phone 904-233-3051
Street Jacksonville 123204 City State	Email nolandlaweact-com
	Zip
Speaking: For Against Information	Waive Speaking: In Support Against (The Chair will read this information into the record.)
Representing Planta Chapter, American	College of PB Surgeons
Appearing at request of Chair: Yes No	Lobbyist registered with Legislature: Ves No
While it is a Senate tradition to encourage public testimony, time meeting. Those who do speak may be asked to limit their remark	may not permit all persons wishing to speak to be heard at this as so that as many persons as possible can be heard.

S-001 (10/14/14)

This form is part of the public record for this meeting.

APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional	I Staff conducting the meeting)
Meeting Date	Bill Number (if applicable)
Topic	Amendment Barcode (if applicable)
Name Jason Goldman, MD	e
Job Title	
Address 3001 Coral Hills Drive	Phone 954-227-1234
Coral Springs, FL 33065 City State Zip	Email goldmanmde tellseith not
Speaking: For Against Information Waives	Speaking: In Support Against hair will read this information into the record.)
Representing Planda Chapter, American College	of Physicians
Appearing at request of Chair: Yes No Lobbyist regis	stered with Legislature: Yes 100

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional S	taff conducting the meeting)
Meeting Date	Bill Number (if applicable)
Topic PIP repeal	Amendment Barcode (if applicable)
Name Ron Watson	
Job Title hobbyist	
Address 3738 Mondon Way	Phone 850 567-1202
Street 32309 City State Zip	Email Water. Students co comes
	peaking: In Support Against ir will read this information into the record.)
Representing Florida Chivopudic Physician	Association
Appearing at request of Chair: Yes No Lobbyist regist	ered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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APPEARANCE RECORD

Meeting Date (Deliver BOTH copies of this form to the Senator or Senate Professional States	taff conducting the meeting) Bill Number (if applicable)
Topic PIP/Emergency Med Pay Name Toni Large	Amendment Barcode (if applicable) (a Silon o Amendment
Job Title	
Address 519 E. Park Ave	Phone (850) 556-1461
Address 519 E. Park Ave Street Jallahoussee, FL 32308	Email toni e sulawinet
Speaking: For Against Information Waive Speaking:	peaking: In Support Against r will read this information into the record.)
Representing Florida College of Emergency Phys	icians & Florida Orthopedic Societ
	ered with Legislature: Yes No
While it is a Senate tradition to encourage public testimony, time may not permit all meeting. Those who do speak may be asked to limit their remarks so that as many	persons wishing to speak to be heard at this
This form is part of the public record for this meeting.	S-001 (10/14/14)

APPEARANCE RECORD

Meeting Date (Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting) Bill Number (if applicable)
Bill Number (if applicable)
Topic Amendment Barcode (if applicable)
Name Kin Driggers by Sen. Passidom
Job Title Lawyer
Address 3770 Diney Grove DR, Phone 850, 597, 1366
Tallahasself + L32311 Email-Kernmers(2)
City State Zip (dm) - 15-/ny
Speaking: For Against Information Waive Speaking: In Support Against (The Chair will read this information into the record.)
Representing Florida Chiropractic Association
Appearing at request of Chair: Yes No Lobbyist registered with Legislature: Yes No
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While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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APPEARANCE RECORD

2/20/18	or Senate Professional Staff conducting the meeting)
Meeting Date	Bill Number (if applicable)
Topic	Amendment Barcode (if applicable)
Name Jeff Scou	
Job Title	
Address 1430 Piedmont Dr. E.	Phone & 50 224-6496
Tallahassez FL	32308 Email jsrotleflmediceloug
Speaking: For Against Information	Waive Speaking: In Support Against (The Chair will read this information into the record.)
Representing Florida Medical Assoc	ation
Appearing at request of Chair: Yes No	Lobbyist registered with Legislature: Yes No

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APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

02.00.10	190				150
Meeting Date				Bill Numbe	r (if applicable) 18
Topic Motor Vehicle Insurance	-		. A	mendment Barcoo	de (if applicable)
Name Rick Parker					
Job Title					
Address 3600 Maclay Blvd.			Phone 850-	894-4111	
Street		·			
Tallahassee	FL	32312	Email jparke	r@butler.lega	ıl
City	State	Zip			
Speaking: For Against	Information		peaking: [] ir will read this in		Against e record.)
Representing Florida Justice	Reform Institute				
Appearing at request of Chair:	Yes No	Lobbyist regist	ered with Leg	islature:	Yes No
While it is a Senate tradition to encourage meeting. Those who do speak may be a				•	

This form is part of the public record for this meeting.

S-001 (10/14/14)

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APPEARANCE RECORD

Meeting Date (Deliver BOTH copies of this form to the Senator or Senate Profe	essional Staff conducting the meeting) Bill Number (if applicable)
Topic	Amendment Barcode (if applicable)
Name STARGE MEROS	KURPBRT
Job Title ATTORNEY	
Address 3/5 5/ CALHOUN	Phone 425 5622
Street FL 32301 City State State	Email URCE MEROS HKLAW.
Speaking: For Against Information W	aive Speaking: In Support Against the Chair will read this information into the record.)
Representing 46. CHAMBER, INSTIT	THE FOR LEGAL REFORM
Appearing at request of Chair: Yes No Lobbyist	registered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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APPEARANCE RECORD

7/20/10	(Deliver BOTH copies of this form to the Senator or S	enate Professional Staff conducting th	
Meeting Date			Bill Number (if applicable)
Topic			Amendment Barcode (if applicable)
Name Jason 6	oldman, m)		
Job Title			
Address Street	Coral Hills Drive	Phone	954-227-1234
	ings, fr 33065	Email_n	de goldmanmy
Speaking: For	Against Information		In Support Against is information into the record.)
Representing	Conda Chapter, American Co	lege of Physicians	
Appearing at request of	of Chair: Yes No Lo	obbyist registered with L	egislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

APPEARANCE RECORD

2/28/18	(Deliver BOTH copies of this form to the Senator	or Senate Professional Staff conducting th	ne meeting)
Meeting Date	- 		Bill Number (if applicable)
			244072
Topic			Amendment Barcode (if applicable)
Name Chris	Mand		
Job Title			
Address 1000	Riverside Ave	Phone <u>9</u>	CY-233-3051
Street	enville, Pa 32204	Email <i>N</i>	Vandlaweach.com
City	State	Zip	
Speaking: For	Against Information	Waive Speaking: [In Support Against is information into the record.)
Representing _	Planda Chapter, America	n College of Singer	nv
Appearing at reque	est of Chair: Yes No	Lobbyist registered with L	egislature: 4 Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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APPEARANCE RECORD

(Doliver BOTH conice of this face to the		
Meeting Date (Deliver BOTH copies of this form to the S	Senator or Senate Professional St	raff conducting the meeting)
weeting Date		Bill Number (if applicable)
Topic PIP reseal		(D) 244072
0 1 11		Amendment Barcode (if applicable)
Name_Kon Watson		
Job Title Laboyist		
Address 3738 Mondon Way		Phone 850 567 - 1202
Tallahrusker FC	32309	Email Watson. Strutegies @ (oucost.
City State	Zip	ret
Speaking: Against Information	Waive Sp	eaking: In Support Against
, ,	(The Chair	will read this information into the record.)
Representing Florida Chivo public	Physician 1	Association
Appearing at request of Chair: Yes No	Lobbyist registe	ered with Legislature: Yes No
While it is a Sonate tradition to anourage mublic testing and	4:	•

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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APPEARANCE RECORD

Deliver BOTH copies of this form to the Senator Meeting Date	or Senate Professional S	taff conducting th		C5/5B Bill Number (i	f applicable)
Name Later Vehicle Insurance			0 11	ent Barcode ((if applicable)
Name Dale Swope					
Job Title President					
Address 218 5. Monroe St.		Phone			
Street Talla. FL	32301	Email			
City	Zip				
Speaking: Against Information		peaking: Lir will read thi	In Sup		against ecord.)
Representing Florida Fustice	Associa	ha			
Appearing at request of Chair: Yes X No	Lobbyist registe	ered with L	.egislatur	e: Ye	s No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the n	neeting)
Meeting Date	Bill Number (if applicable)
Topic ASTO TUSURANCE -	352738 Amendment Barcode (if applicable)
Name Dale Swapl	
Job Title President of Florida Titia A	20°W
Address 1234 5th Avel Phone	
Email_	
	In Support Against information into the record.)
Representing Florida Tustia Azun.	
Appearing at request of Chair: Yes No Lobbyist registered with Leg	gislature: Yes No
While it is a Senate tradition to encourage public testimony, time may not permit all persons wishin meeting. Those who do speak may be asked to limit their remarks so that as many persons as pos	• ,

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