## Bill No. CS for SB 2522, 2nd Eng.

Amendment No. \_\_\_\_

CHAMBER ACTION	
	Senate ·
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11	Senator Rossin moved the following amendment to House
12	amendment (121637):
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14	Senate Amendment (with title amendment)
15	On page 8, line 13,
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17	insert:
18	Section 15. Paragraphs (e) and (f) of subsection (1)
19	of section 626.321, Florida Statutes, 1998 Supplement, are
20	amended to read:
21	626.321 Limited licenses
22	(1) The department shall issue to a qualified
23	individual, or a qualified individual or entity under
24	paragraphs (c), (d), and (e), a license as agent authorized to
25	transact a limited class of business in any of the following
26	categories:
27	(e) Credit life or disability insuranceLicense
28	covering only credit life or disability insurance. The
29	license may be issued only to an individual employed by a life
30	or health insurer as an officer or other salaried or
31	commissioned representative, or to an individual employed by
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or associated with a lending or financing institution or creditor, and may authorize the sale of such insurance only with respect to borrowers or debtors of such lending or financing institution or creditor. However, only the individual or entity whose tax identification number is used in receiving or is credited with receiving the commission from the sale of such insurance shall be the licensed agent of the insurer. No individual while so licensed shall hold a license as an agent or solicitor as to any other or additional kind or class of life or health insurance coverage. An entity other than a lending or financial institution defined in s. 626.988 holding a limited license under this paragraph shall also be authorized to sell credit property insurance. An entity applying for a license under this section:

- 1. Is required to submit only one application for a license under s. 626.171.
- 2. Is required to obtain a license for each office, branch office, or place of business making use of the entity's business name by applying to the department for the license on a simplified form developed by rule of the department for this purpose.
- 3. Is not required to pay any additional application fees for a license issued to the offices or places of business referenced in subsection (2), but is required to pay the license fee as prescribed in s. 624.501, be appointed under s. 626.112, and pay the prescribed appointment fee under s. 624.501. The license obtained under this paragraph shall be posted at the business location for which it was issued so as to be readily visible to prospective purchasers of such coverage.
  - (f) Credit insurance. -- License covering only credit

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insurance, as such insurance is defined in s. 624.605(1)(i), and no individual or entity so licensed shall, during the same period, hold a license as an agent or solicitor as to any other or additional kind of life or health insurance with the exception of credit life or disability insurance as defined in paragraph (e). The same licensing provisions as outlined in paragraph (e) apply to entities licensed as credit insurance agents under this paragraph.

Section 16. Subsection (1) of section 626.989, Florida Statutes, 1998 Supplement, is amended to read:

626.989 Division of Insurance Fraud; definition; investigative, subpoena powers; protection from civil liability; reports to division; division investigator's power to execute warrants and make arrests.--

(1) For the purposes of this section, a person commits a "fraudulent insurance act" if the person 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. For the purposes of this section, the term "insurer" also includes any health maintenance organization and the term "insurance policy" also includes a health maintenance

31 organization subscriber contract.

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Section 17. Section 626.9892, Florida Statutes, is 1 2 created to read:

626.9892 Anti-Fraud Reward Program; reporting of insurance fraud. --

- (1) The Anti-Fraud Reward Program is hereby established within the department, to be funded from the Insurance Commissioner's Regulatory Trust Fund.
- (2) The department may pay rewards of up to \$25,000 to persons providing information leading to the arrest and conviction of persons committing complex or organized crimes investigated by the Division of Insurance Fraud arising from violations of s. 440.105, s. 624.15, s. 626.9541, s. 626.989, or s. 817.234.
- (3) Only a single reward amount may be paid by the department for claims arising out of the same transaction or occurrence, regardless of the number of persons arrested and convicted and the number of persons submitting claims for the reward. The reward may be disbursed among more than one person in amounts determined by the department.
- The department shall adopt rules which set forth (4)the application and approval process, including the criteria against which claims shall be evaluated, the basis for determining specific reward amounts, and the manner in which rewards shall be disbursed. Applications for rewards authorized by this section must be made pursuant to rules established by the department.
- (5) Determinations by the department to grant or deny a reward under this section shall not be considered agency action subject to review under s. 120.569 or s. 120.57.

Section 18. Section 641.3915, Florida Statutes, is 31 | created to read:

641.3915 Health maintenance organization anti-fraud 1 2 plans and investigative units. -- Each authorized health 3 maintenance organization and applicant for a certificate of 4 authority shall comply with the provisions of ss. 626.989 and 626.9891 as though such organization or applicant were an 5 6 authorized insurer. For purposes of this section, the 7 reference to the year 1996 in s. 626.9891 means the year 2000 and the reference to the year 1995 means the year 1999. 8 Section 19. Paragraph (h) of subsection (2) of section 9 10 775.15, Florida Statutes, 1998 Supplement, is amended to read: 775.15 Time limitations.--11 12 (2) Except as otherwise provided in this section, 13 prosecutions for other offenses are subject to the following 14 periods of limitation: 15 (h) A prosecution for a felony violation of s. 440.105 16 and s. 817.234 must be commenced within 5 years after the 17 violation is committed. Section 20. Subsections (1), (2), (3), (4), and (10) 18 of section 817.234, Florida Statutes, 1998 Supplement, are 19 20 amended, and subsections (11) and (12) are added to said 21 section, to read: 817.234 False and fraudulent insurance claims.--22

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, 31 | incomplete, or misleading information concerning any fact or

provided in subsection (11) if that Any person who, with the

(1)(a) A person commits insurance fraud punishable as

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

22 commits a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084. 23

(b) All claims and application forms shall contain a statement that is approved by the Department of Insurance that clearly states in substance the following: "Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree." This paragraph shall 31 | not apply to reinsurance contracts, reinsurance agreements, or

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## reinsurance claims transactions. The changes in this paragraph relating to applications shall take effect on March 1, 1996.

3 (2) Any physician licensed under chapter 458, 4 osteopathic physician licensed under chapter 459, chiropractic 5 physician licensed under chapter 460, or other practitioner 6 licensed under the laws of this state who knowingly and 7 willfully assists, conspires with, or urges any insured party to fraudulently violate any of the provisions of this section 8 9 or part XI of chapter 627, or any person who, due to such 10 assistance, conspiracy, or urging by said physician, osteopathic physician, chiropractic physician, or 11 12 practitioner, knowingly and willfully benefits from the 13 proceeds derived from the use of such fraud, commits insurance fraud is guilty of a felony of the third degree, punishable as 14 15 provided in subsection (11)<del>s. 775.082, s. 775.083, or s.</del> 16 775.084. In the event that a physician, osteopathic physician, 17 chiropractic physician, or practitioner is adjudicated guilty of a violation of this section, the Board of Medicine as set 18 forth in chapter 458, the Board of Osteopathic Medicine as set 19 forth in chapter 459, the Board of Chiropractic Medicine as 20 21 set forth in chapter 460, or other appropriate licensing authority shall hold an administrative hearing to consider the 22 imposition of administrative sanctions as provided by law 23 24 against said physician, osteopathic physician, chiropractic

(3) Any attorney who knowingly and willfully assists, conspires with, or urges any claimant to fraudulently violate any of the provisions of this section or part XI of chapter 627, or any person who, due to such assistance, conspiracy, or urging on such attorney's part, knowingly and willfully 31 benefits from the proceeds derived from the use of such fraud,

physician, or practitioner.

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commits <u>insurance fraud</u> a felony of the third degree, punishable as provided in <u>subsection (11)</u>s. 775.082, s. 775.083, or s. 775.084.

- (4) Any No person or governmental unit licensed under chapter 395 to maintain or operate a hospital, and any <del>no</del> administrator or employee of any such hospital, who shall knowingly and willfully allows allow the use of the facilities of said hospital by an insured party in a scheme or conspiracy to fraudulently violate any of the provisions of this section or part XI of chapter 627. Any hospital administrator or employee who violates this subsection commits insurance fraud a felony of the third degree, punishable as provided in subsection (11)s. 775.082, s. 775.083, or s. 775.084. Any adjudication of guilt for a violation of this subsection, or the use of business practices demonstrating a pattern indicating that the spirit of the law set forth in this section or part XI of chapter 627 is not being followed, shall be grounds for suspension or revocation of the license to operate the hospital or the imposition of an administrative penalty of up to \$5,000 by the licensing agency, as set forth in chapter 395.
- (10) As used in this section, the term "insurer" means any insurer, <u>health maintenance organization</u>, self-insurer, self-insurance fund, or other similar entity or person regulated under chapter 440 <u>or chapter 641</u> or by the Department of Insurance under the Florida Insurance Code.
- (11) If the value of any property involved in a violation of this section:
- (a) Is less than \$20,000, the offender commits a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.

(b) Is \$20,000 or more, but less than \$100,000, the 1 2 offender commits a felony of the second degree, punishable as 3 provided in s. 775.082, s. 775.083, or s. 775.084. 4 (c) Is \$100,000 or more, the offender commits a felony of the first degree, punishable as provided in s. 775.082, s. 5 6 775.083, or s. 775.084. 7 (12) As used in this section: 8 "Property" means property as defined in s. 9 812.012. 10 (b) "Value" means value as defined in s. 812.012. Section 21. Subsection (4) of section 817.505, Florida 11 12 Statutes, 1998 Supplement, is amended to read: 13 817.505 Patient brokering prohibited; exceptions; 14 penalties. --15 (4) Any person, including an officer, partner, agent, 16 attorney, or other representative of a firm, joint venture, 17 partnership, business trust, syndicate, corporation, or other business entity, who violates any provision of this section 18 commits: 19 (a) A misdemeanor of the first degree for a first 20 21 violation, punishable as provided in s. 775.082 or by a fine 22 not to exceed \$5,000, or both. (b) a felony of the third degree for a second or 23 24 subsequent violation, punishable as provided in s. 775.082, s. 25 775.083, or s. 775.084 or by a fine not to exceed \$10,000, or 26 both. 27 Section 22. For the purpose of incorporating the 28 amendment to subsection (4) of section 817.505, Florida Statutes, 1998 Supplement, in a reference thereto, subsection 29

(3) of section 455.657, Florida Statutes, is reenacted to

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31 read:

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1	455.657 Kickbacks prohibited
2	(3) Violations of this section shall be considered
3	patient brokering and shall be punishable as provided in s.
4	817.505.
5	Section 23. The sum of \$250,000 is hereby appropriated
6	from the Insurance Commissioner's Regulatory Trust Fund in a
7	nonoperating category for state fiscal year 1999-2000 for the
8	purpose of implementing the reward program under s. 626.9892,
9	Florida Statutes, as created by this act.
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12	========= T I T L E A M E N D M E N T ==========
13	And the title is amended as follows:
14	On page 8, line 28, after the semicolon
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16	insert:
17	amending s. 626.321, F.S.; providing
18	requirements for limited licenses for credit
19	life or disability insurance and credit
20	insurance; amending s. 626.989, F.S.; defining
21	the terms "insurer" and "insurance policy" for
22	purposes of determining insurance fraud;
23	creating s. 626.9892, F.S.; establishing the
24	Anti-Fraud Reward Program in the department;
25	providing for rewards under certain
26	circumstances; requiring the department to
27	adopt rules to implement the program; exempting
28	review of department decisions relating to
29	rewards; creating s. 641.3915, F.S.; requiring
30	certain health maintenance organizations to
31	comply with insurer anti-fraud requirements;

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providing construction; amending s. 775.15, F.S.; extending the statute of limitations for certain insurance fraud violations; amending s. 817.234, F.S.; specifying a schedule of criminal penalties for committing insurance fraud; providing definitions; providing application to health maintenance organizations and contracts; amending s. 817.505, F.S.; revising a penalty for patient brokering; reenacting s. 455.657(3), F.S., relating to kickbacks, to incorporate changes; providing an appropriation;