Bill No. SB 1906 Amendment No. Barcode 151366 CHAMBER ACTION Senate House 1 2 3 4 5 6 7 8 9 10 11 Senator Latvala moved the following amendment: 12 13 Senate Amendment (with title amendment) On page 3, between lines 11 and 12, 14 15 16 insert: 17 Section 3. Subsection (6) is added to section 18 624.3161, Florida Statutes, to read: 624.3161 Market conduct examinations.--19 20 (6) The department shall adopt rules as necessary to effectuate the market conduct examination process, to assure 21 22 compliance by the person examined with the applicable provisions of the Insurance Code. Such rules shall not exceed 23 24 the authority of the statutes involved in the market conduct 25 examination. 26 Section 4. Subsection (8) is added to section 626.171, 27 Florida Statutes, to read: 626.171 Application for license.--28 29 (8) The department shall adopt rules to effectuate the license application process, including photo identification, 30 31 background checks and credit reports, prelicensing courses, 1 4:15 PM 05/01/01 s1906.bi19.0f

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the impact of criminal and law enforcement history, and other 1 2 relevant information in an effort to determine an applicant's 3 fitness and trustworthiness to engage in the business of 4 insurance. 5 Section 5. Paragraphs (o) and (w) of subsection (1) of 6 section 626.9541, Florida Statutes, are amended to read: 7 626.9541 Unfair methods of competition and unfair or deceptive acts or practices defined. --8 (1) UNFAIR METHODS OF COMPETITION AND UNFAIR OR 9 10 DECEPTIVE ACTS.--The following are defined as unfair methods of competition and unfair or deceptive acts or practices: 11 12 (o) Illegal dealings in premiums; excess or reduced charges for insurance.--13 Knowingly collecting any sum as a premium or charge 14 1. 15 for insurance, which is not then provided, or is not in due course to be provided, subject to acceptance of the risk by 16 17 the insurer, by an insurance policy issued by an insurer as permitted by this code. 18 19 Knowingly collecting as a premium or charge for 2. insurance any sum in excess of or less than the premium or 20 21 charge applicable to such insurance, in accordance with the applicable classifications and rates as filed with and 22 approved by the department, and as specified in the policy; 23 24 or, in cases when classifications, premiums, or rates are not 25 required by this code to be so filed and approved, premiums 26 and charges in excess of or less than those specified in the 27 policy and as fixed by the insurer. This provision shall not 28 be deemed to prohibit the charging and collection, by surplus lines agents licensed under part VIII of this chapter, of the 29 30 amount of applicable state and federal taxes, or fees as 31 authorized by s. 626.916(4), in addition to the premium

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required by the insurer or the charging and collection, by 1 2 licensed agents, of the exact amount of any discount or other 3 such fee charged by a credit card facility in connection with 4 the use of a credit card, as authorized by subparagraph (q)3., 5 in addition to the premium required by the insurer. This 6 subparagraph shall not be construed to prohibit collection of 7 a premium for a universal life or a variable or indeterminate value insurance policy made in accordance with the terms of 8 9 the contract.

10 3.a. Imposing or requesting an additional premium for a policy of motor vehicle liability, personal injury 11 12 protection, medical payment, or collision insurance or any combination thereof or refusing to renew the policy solely 13 because the insured was involved in a motor vehicle accident 14 unless the insurer's file contains information from which the 15 insurer in good faith determines that the insured was 16 17 substantially at fault in the accident.

b. An insurer which imposes and collects such a 18 surcharge or which refuses to renew such policy shall, in 19 20 conjunction with the notice of premium due or notice of 21 nonrenewal, notify the named insured that he or she is entitled to reimbursement of such amount or renewal of the 22 policy under the conditions listed below and will subsequently 23 24 reimburse him or her or renew the policy, if the named insured demonstrates that the operator involved in the accident was: 25 26

(I) Lawfully parked;

27 (II) Reimbursed by, or on behalf of, a person 28 responsible for the accident or has a judgment against such 29 person;

30 (III) Struck in the rear by another vehicle headed in 31 the same direction and was not convicted of a moving traffic

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violation in connection with the accident; 1 2 (IV) Hit by a "hit-and-run" driver, if the accident 3 was reported to the proper authorities within 24 hours after 4 discovering the accident; (V) Not convicted of a moving traffic violation in 5 6 connection with the accident, but the operator of the other 7 automobile involved in such accident was convicted of a moving traffic violation; 8 (VI) Finally adjudicated not to be liable by a court 9 10 of competent jurisdiction; (VII) In receipt of a traffic citation which was 11 12 dismissed or nolle prossed; or 13 (VIII) Not at fault as evidenced by a written statement from the insured establishing facts demonstrating 14 15 lack of fault which are not rebutted by information in the 16 insurer's file from which the insurer in good faith determines 17 that the insured was substantially at fault. c. In addition to the other provisions of this 18 subparagraph, an insurer may not fail to renew a policy if the 19 20 insured has had only one accident in which he or she was at 21 fault within the current 3-year period. However, an insurer may nonrenew a policy for reasons other than accidents in 22 accordance with s. 627.728. This subparagraph does not 23 24 prohibit nonrenewal of a policy under which the insured has 25 had three or more accidents, regardless of fault, during the most recent 3-year period. 26 27 Imposing or requesting an additional premium for, 4. 28 or refusing to renew, a policy for motor vehicle insurance solely because the insured committed a noncriminal traffic 29

30 infraction as described in s. 318.14 unless the infraction is:
31 a. A second infraction committed within an 18-month

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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.

10 6. No insurer shall impose or request an additional 11 premium for motor vehicle insurance, cancel or refuse to issue 12 a policy, or refuse to renew a policy because the insured or 13 the applicant is a handicapped or physically disabled person, 14 so long as such handicap or physical disability does not 15 substantially impair such person's mechanically assisted 16 driving ability.

17 7. No insurer may cancel or otherwise terminate any 18 insurance contract or coverage, or require execution of a consent to rate endorsement, during the stated policy term for 19 20 the purpose of offering to issue, or issuing, a similar or 21 identical contract or coverage to the same insured with the 22 same exposure at a higher premium rate or continuing an 23 existing contract or coverage with the same exposure at an 24 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.

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9. No insurer shall, with respect to premiums charged 1 2 for motor vehicle insurance, unfairly discriminate solely on 3 the basis of age, sex, marital status, location of the risk, 4 accidents more than 3 years old, or scholastic achievement. 5 10. Imposing or requesting an additional premium for 6 motor vehicle comprehensive or uninsured motorist coverage 7 solely because the insured was involved in a motor vehicle accident or was convicted of a moving traffic violation. 8 11. No insurer shall cancel or issue a nonrenewal 9 10 notice on any insurance policy or contract without complying with any applicable cancellation or nonrenewal provision 11 12 required under the Florida Insurance Code. No insurer shall impose or request an additional 13 12. premium, cancel a policy, or issue a nonrenewal notice on any 14 15 insurance policy or contract because of any traffic infraction 16 when adjudication has been withheld and no points have been 17 assessed pursuant to s. 318.14(9) and (10). However, this subparagraph does not apply to traffic infractions involving 18 accidents in which the insurer has incurred a loss due to the 19 fault of the insured. 20 21 (w) Soliciting or accepting new or renewal insurance risks by insolvent or impaired insurer prohibited; penalty .--22 Whether or not delinquency proceedings as to the 23 1. 24 insurer have been or are to be initiated, but while such 25 insolvency or impairment exists, no director or officer of an insurer, except with the written permission of the Department 26 27 of Insurance, shall authorize or permit the insurer to solicit or accept new or renewal insurance risks in this state after 28

30 known, that the insurer was insolvent or impaired. "Impaired" 31 includes impairment for capital or surplus, as defined in s.

such director or officer knew, or reasonably should have

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631.011(12)(9)and(13)(10). 1 Any such director or officer, upon conviction of a 2 3 violation of this paragraph, is guilty of a felony of the 4 third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084. 5 Section 6. Section 626.9552, Florida Statutes, is б 7 created to read: 8 626.9552 Single interest insurance.--(1) When single interest insurance is written at the 9 10 expense of the purchaser or borrower in connection with a finance or loan transaction, a clear and concise statement 11 12 must be furnished the purchaser or borrower advising the 13 purchaser or borrower that the insurance effected is solely for the interest of the financing entity, and that no 14 15 protection thereunder exists for the benefit of the purchaser or borrower. When single interest insurance is written, no 16 17 effort may be made by the insurer to recover the amount of any 18 payment from the borrower. Single interest insurance policies must be clearly stamped or printed on the declarations page, 19 "Single Interest Only----No Subrogation." Single interest 20 21 insurance is to be placed only after it has been determined that no other kind of insurance can be placed on the risk, 22 except with the consent of the purchaser or borrower. Single 23 24 interest may be written in cases of inland marine installment sales floater policies. If insurance cannot be obtained for 25 26 the dual protection of the purchaser or borrower, and the 27 seller or lender or financing entity for all the coverages 28 contemplated, or if obtained, is canceled by the insurer before expiration, the seller or lender or financing entity 29 30 may obtain insurance to protect his or her interest in the motor vehicle or other personal property, and the purchaser or 31

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borrower may be required to pay the cost thereof. In such 1 event the seller or lender or financing entity shall promptly 2 3 notify the purchaser or borrower that such insurance cannot be 4 obtained, or has been canceled, and credit to the purchaser or borrower the difference between the amount charged for dual 5 protection insurance and the actual cost of such single 6 interest insurance, less, in the event of cancellation, the 7 earned premium on the dual interest insurance for the period 8 it was in force. If the purchaser or borrower procures 9 10 acceptable dual interest insurance within 30 days after the 11 date of such notice and provides the seller or lender, or 12 finance entity with evidence that the premium therefore has 13 been paid, there is no charge to him or her for the single interest coverage. As used in this section, the term 14 15 "financing entity" means a finance company, bank, or other lending institution. However, those lenders licensed under the 16 17 Consumer Finance Act, chapter 516, must provide coverage issued in the name of the borrower containing the customary 18 mortgagee or loss payee clause. 19 (2) If a certificate is issued under a master policy, 20 21 the same coverage as provided in an individual policy will 22 apply. (3) The provisions of this section do not apply to 23 24 title insurance as defined in s. 624.608. 25 Section 7. Paragraph (a) of subsection (2) of section 26 627.062, Florida Statutes, is amended to read: 27 627.062 Rate standards.--(2) As to all such classes of insurance: 28 (a) Insurers or rating organizations shall establish 29 30 and use rates, rating schedules, or rating manuals to allow 31 the insurer a reasonable rate of return on such classes of 8 4:15 PM 05/01/01 s1906.bi19.0f

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1 insurance written in this state. Copies A copy of rates, 2 rating schedules, rating manuals, premium credits or discount 3 schedules, and surcharge schedules, and changes thereto, shall 4 be filed with the department under one of the following 5 procedures:

6 1. If the filing is made at least 90 days before the 7 proposed effective date and the filing is not implemented during the department's review of the filing and any 8 9 proceeding and judicial review, then such filing shall be 10 considered a "file and use" filing. In such case, the department shall finalize its review by issuance of a notice 11 12 of intent to approve or a notice of intent to disapprove within 90 days after receipt of the filing. The notice of 13 14 intent to approve and the notice of intent to disapprove 15 constitute agency action for purposes of the Administrative 16 Procedure Act. Requests for supporting information, requests 17 for mathematical or mechanical corrections, or notification to the insurer by the department of its preliminary findings 18 shall not toll the 90-day period during any such proceedings 19 and subsequent judicial review. The rate shall be deemed 20 21 approved if the department does not issue a notice of intent to approve or a notice of intent to disapprove within 90 days 22 after receipt of the filing. 23

24 2. If the filing is not made in accordance with the provisions of subparagraph 1., such filing shall be made as 25 soon as practicable, but no later than 30 days after the 26 27 effective date, and shall be considered a "use and file" filing. An insurer making a "use and file" filing is 28 potentially subject to an order by the department to return to 29 30 policyholders portions of rates found to be excessive, as 31 provided in paragraph (h).

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1 Section 8. Subsection (4) is added to section 2 627.0625, Florida Statutes, to read: 3 627.0625 Commercial property and casualty risk 4 management plans .--5 (4) Commercial motor vehicle policies that are issued 6 to satisfy mandatory financial responsibility requirements of 7 a state or local government must provide first dollar coverage to third-party claimants without a deductible. With respect to 8 such practices, the department may adopt rules necessary to 9 10 assure that claims are administered fairly as required by law. Section 9. Subsection (8) of section 627.0651, Florida 11 12 Statutes, is amended to read: 627.0651 Making and use of rates for motor vehicle 13 14 insurance.--15 (8) Rates are not unfairly discriminatory if averaged 16 broadly among members of a group; nor are rates unfairly 17 discriminatory even though they are lower than rates for nonmembers of the group. However, such rates are unfairly 18 discriminatory if they are not actuarially measurable and 19 20 credible and sufficiently related to actual or expected loss 21 and expense experience of the group so as to assure that nonmembers of the group are not unfairly discriminated 22 against. Use of a single United States Postal Service zip code 23 24 as a rating territory shall be deemed unfairly discriminatory. An insurer may not impose a surcharge or discount for 25 26 liability coverages based on the type of vehicle without 27 providing acceptable actuarial justification. 28 Section 10. Section 627.385, Florida Statutes, is 29 created to read: 30 627.385 Conduct of residual market board members .--(1)(a) For various insurance coverages, a residual 31 10

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market has been created by legislation to provide a market of 1 2 last resort for individuals unable to secure coverage in the 3 voluntary market. 4 (b) Each residual market's enabling legislation calls 5 for the establishment of a board of governors or directors 6 that operates subject to a plan of operation. The board, in 7 carrying out its obligations, must engage in business transactions in order to provide and administer the required 8 coverage and maintain adequate funds to support the plan. In 9 10 order for the board to fully execute its responsibilities required by law, conflict of interest or inappropriate 11 12 activity by board members, or the appearance thereof, with 13 regard to member insurers or policyholders of the residual market mechanism must be avoided. The Legislature has 14 15 determined that the provisions set forth in subsection (2) are 16 necessary to protect the public interest by ensuring fair, 17 reasonable, and beneficial board practice and activity. 18 (c) This section applies to the Florida Medical Malpractice Joint Underwriting Association, the Florida 19 20 Automobile Joint Underwriting Association, the Florida 21 Workers' Compensation Joint Underwriting Association, the Florida Comprehensive Health Association, the Florida 22 Windstorm Underwriting Association, the Florida Property and 23 24 Casualty Joint Underwriting Association, the Florida 25 Residential Property and Casualty Joint Underwriting 26 Association, and the board members thereof. 27 (2) To ensure that the board is free from potential 28 conflict or inappropriate behavior the following are adopted in the plan of operation of the subject residual market in 29 30 this state. 31 (a) A board member may not act as a servicing carrier 11 4:15 PM 05/01/01 s1906.bi19.0f

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or administering entity for the subject plan, other than a 1 2 claim adjustment contract open to all members of the plan. (b) A board member or board member representative may 3 4 not use his or her position to foster or facilitate any special pecuniary gain for himself or herself, his or her 5 6 member company, or any other entity in which the board member 7 or board member representative or the member company has a substantial financial interest, except as otherwise provided 8 9 in paragraph (a). 10 (c) A board member or board member representative may not use his or her position on the board to secure or promote 11 12 any business relationship from which he or she may derive a financial gain. 13 (d) A board member or designee may not receive any 14 15 gift or gratuity, except as provided in s. 112.3248, other 16 than meals, while acting in his or her capacity as a board 17 member. 18 (3) Board members and board member representatives shall maintain reasonable board expenses based on state travel 19 20 policy as set forth in s. 112.061. The board shall develop a 21 detailed policy regarding board member travel, which policy must be based on s. 112.061 and is subject to the approval of 22 23 the department. 24 Section 11. Section 627.4065, Florida Statutes, is created to read: 25 627.4065 Insured's right to return policy; notice.--A 26 27 health insurance policy issued or issued for delivery in this 28 state must have printed or stamped thereon or attached thereto 29 a notice in a prominent place stating in substance that the 30 policyholder may return the policy to the insurer within 10 days after its delivery and may have the premium paid refunded 31 12

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if, after examination of the policy or contract, the 1 2 policyholder is not satisfied with it for any reason. The 3 notice must provide that if the policyholder, pursuant to such 4 notice, returns the policy or contract to the insurer at its home office or branch office or to the agent through whom it 5 6 was purchased, it is considered void from the beginning and 7 the parties are in the same position as if no policy or contract had been issued. This section does not apply to group 8 policies, single premium nonrenewable policies or travel 9 10 accident policies. Section 12. Section 627.41345, Florida Statutes, is 11 12 created to read: 627.41345 Certificate of insurance.--An insurer or 13 agent may not issue or sign a certificate of insurance that 14 15 contains terms or conditions that differ from those in the 16 policy under which the certificate of insurance is issued. In 17 the event of a conflict, the terms of the policy under which 18 the certificate of insurance is issued shall control. 19 Section 13. Subsection (9) is added to section 627.7015, Florida Statutes, to read: 20 21 627.7015 Alternative procedure for resolution of disputed property insurance claims. --22 (9) For purposes of this section, the term "claim" 23 24 refers to any dispute between an insurer and an insured relating to a material issue of fact other than a dispute: 25 (a) With respect to which the insurer has a reasonable 26 27 basis to suspect fraud; 28 (b) Where, based on agreed-upon facts as to the cause 29 of loss, there is no coverage under the policy; 30 (c) With respect to which the insurer has a reasonable 31 basis to believe that the claimant has intentionally made a 13 4:15 PM 05/01/01 s1906.bi19.0f

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material misrepresentation of fact which is relevant to the 1 2 claim, and the entire request for payment of a loss has been 3 denied on the basis of the material misrepresentation; or 4 (d) Where the amount in controversy is less than \$500, unless the parties agree to mediate a dispute involving a 5 6 lesser amount. 7 Section 14. Section 627.7276, Florida Statutes, is 8 amended to read: 9 627.7276 Notice of limited coverage.--10 (1) The following notice of limited coverage shall An automobile policy that does not contain coverage for bodily 11 12 injury and property damage must be clearly stamped or printed 13 on any automobile insurance policy that provides coverage only for first-party damage to the insured vehicle, but does not 14 15 provide coverage for bodily injury liability, property damage 16 liability, or personal injury protection to the effect that 17 such coverage is not included in the policy in the following 18 manner: 19 20 "THIS POLICY DOES NOT PROVIDE BODILY INJURY 21 LIABILITY, AND PROPERTY DAMAGE LIABILITY, OR PERSONAL INJURY PROTECTION INSURANCE OR ANY 22 OTHER COVERAGE FOR WHICH A SPECIFIC PREMIUM 23 24 CHARGE IS NOT MADE, AND DOES NOT COMPLY WITH 25 ANY FINANCIAL RESPONSIBILITY LAW OR WITH THE 26 FLORIDA MOTOR VEHICLE NO-FAULT LAW." 27 28 (2) This legend must appear on the policy declaration 29 page and on the filing back of the policy and be printed in a contrasting color from that used on the policy and in type 30 31 larger than the largest type used in the text thereof, as an 14

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overprint or by a rubber stamp impression. 1 2 Section 15. Section 627.795, Florida Statutes, is 3 created to read: 4 627.795 Policy exceptions .--5 (1) A title insurance commitment must be issued on all 6 real estate closing transactions when a title insurance policy 7 is to be issued, except for multiple conveyances on the same 8 property such as timesharing. 9 (2) A gap exception may not be deleted on a commitment 10 until the time of closing. Section 16. Subsection (1) of section 627.918, Florida 11 12 Statutes, is amended to read: 627.918 Reporting formats.--13 (1) The department shall require that the reporting 14 15 provided for in this part be made on forms adopted established 16 by the department or in a format compatible with the 17 department's its electronic data processing equipment. The 18 department shall adopt by rule standards for such approval. 19 Section 17. Subsection (3) of section 641.3108, 20 Florida Statutes, is amended to read: 641.3108 Notice of cancellation of contract.--21 (3) In the case of a health maintenance contract 22 issued to an employer or person holding the contract on behalf 23 24 of the subscriber group, the health maintenance organization 25 may make the notification through the employer or group contract holder, and, if the health maintenance organization 26 27 elects to take this action through the employer or group 28 contract holder, the organization shall be deemed to have complied with the provisions of this section upon notifying 29 30 the employer or group contract holder of the requirements of 31 this section and requesting the employer or group contract

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holder to forward to all subscribers the notice required 1 2 herein. If a subscriber group contract is not renewed due to claim experience, the subscriber group is entitled to receive 3 4 information concerning its loss ratio. If requested by a subscriber group, a detailed claim experience record may be 5 provided at a reasonable expense. The record shall maintain б 7 subscriber confidentiality. Section 18. Section 626.9651, Florida Statutes, is 8 9 created to read: 10 626.9651 Privacy.--The department shall adopt rules consistent with other provisions of the Insurance Code to 11 12 govern the use of a consumer's nonpublic personal financial 13 and health information. These rules shall be based on, consistent with, and not more restrictive than the National 14 15 Association of Insurance Commissioners' Privacy of Consumer Financial and Health Information Regulation adopted September 16 17 26, 2000, by the National Association of Insurance Commissioners, provided, however, the rules shall permit the 18 use and disclosure of nonpublic personal health information 19 for scientific, medical, or public policy research in 20 accordance with federal law. In addition, these rules shall 21 be consistent with, and not more restrictive than, the 22 standards contained in Title V of the Gramm-Leach-Bliley Act 23 24 of 1999 (Pub. L. No. 106-102). Any health insurer or health maintenance organization determined by the department to be in 25 compliance with, or to be actively undertaking compliance 26 27 with, the consumer privacy protection rules promulgated by the 28 United States Department of Health and Human Services, in 29 conformance with the Health Insurance Portability and 30 Affordability Act, shall be deemed in compliance with this section. This section shall take effect July 1, 2001. 31 16

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1 Section 19. Section 631.001, Florida Statutes, is 2 amended to read: 3 (Substantial rewording of section. 4 See s. 631.001, F.S., for present text.) 5 631.001 Construction; purposes. --6 (1) The underlying purposes and policies of the 7 provisions of this part, which are integral elements of the regulation of the business of insurance and are of vital 8 public interest and concern, are to: 9 10 (a) Protect the interests of insureds, claimants, 11 creditors, and the public. 12 (b) Provide a comprehensive scheme for the 13 receivership of insurers. (c) Establish this state as a reciprocal state in 14 15 those states which, in substance and effect, enact the National Association of Insurance Commissioners Rehabilitation 16 17 and Liquidation Model Act or the Uniform Insurers Liquidation 18 Act. 19 (d) Make more efficient the administration of insurer 20 receiverships on an interstate and international basis. 21 (e) Provide prompt corrective measures for any potentially dangerous condition in an insurer. 22 (f) Implement improved methods for rehabilitating 23 insurers, which methods involve the cooperation and management 24 expertise of the insurance industry. 25 26 (g) Enhance the efficiency and economy of liquidation 27 through clarification and specification of the law to minimize 28 legal uncertainty and litigation. 29 (h) Lessen the problems of interstate rehabilitation 30 and liquidation of an entity subject to the provisions of this part by facilitating cooperation between states in the 31 17

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liquidation process and by extension of the scope of personal 1 2 jurisdiction over debtors of the insurer outside this state. 3 (i) Establish a system which equitably apportions any 4 unavoidable loss. 5 (j) Maximize recovery of assets for the benefit of the 6 insurer and its policyholders, creditors, and estate. 7 (2) This part shall be liberally construed to effect the purposes stated in subsection (1) and shall specifically 8 authorize the department in its capacity as administrator, 9 10 conservator, rehabilitator, receiver, liquidator, or similar 11 capacity to pursue any actions for damages or other recoveries 12 on behalf of the insurer and its policyholders, creditors, and 13 estate. 14 (3) This part may be cited as the "Insurers 15 Rehabilitation and Liquidation Act." Section 20. Section 631.011, Florida Statutes, is 16 17 amended to read: 18 631.011 Definitions.--For the purpose of this part, the term: 19 20 "Affiliate" means any entity which exercises (1) 21 control over or is controlled by the insurer, directly or indirectly through: 22 (a) Equity ownership of voting securities; 23 24 (b) Common managerial control; or 25 (c) Collusive participation by the management of the 26 insurer and affiliate in the management of the insurer or the 27 affiliate. (2) "Ancillary state" means, any state other than a 28 29 domiciliary state. 30 (3) "Assets," as used in this section subsections 31 $\frac{(8)-(10)}{(8)-(10)}$, means only allowed assets as defined in chapter 625. 18 4:15 PM 05/01/01 s1906.bi19.0f

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"Bona fide holder for value" means a holder who, 1 (4) 2 while not possessing information that would lead a reasonable 3 person in the holder's position to believe that the insurer is 4 financially impaired, and while unaware of the imminence or 5 pendency of any receivership proceeding against the insurer, 6 has, in the exercise of reasonable business judgment, 7 exchanged his or her own funds, assets, or property for funds, assets, or property of the insurer having an equivalent market 8 9 value. 10 (5) (4) "Court" refers to the circuit court in which 11 the receivership proceeding is pending. 12 (6)(5) "Delinquency proceeding" means any proceeding 13 commenced against an insurer pursuant to this chapter for the 14 purpose of liquidating, rehabilitating, reorganizing, or 15 conserving such insurer. (7)(6) "Domiciliary state" means the state in which an 16 17 insurer is incorporated or organized or, in the case of an insurer incorporated or organized in a foreign country, the 18 state in which such insurer, having become authorized to do 19 business in such state, has, at the commencement of a 20 21 delinquency proceeding, the largest amount of its assets held in trust and assets held on deposit for the benefit of its 22 policyholders or policyholders and creditors in the United 23 24 States; and any such insurer is deemed to be domiciled in such 25 state. "Fair consideration" means that consideration 26 (8) 27 which is given for property or assets of an insurer when, in 28 exchange for the property or assets and in good faith, 29 property is conveyed, services are rendered, or an enforceable 30 obligation not invalidated by the receivership proceedings is created, having a value to the insurer of not less than the 31 19 4:15 PM 05/01/01 s1906.bi19.0f

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value of the property or assets given in exchange. 1 2 (9)(7) "Foreign country" means territory not in any 3 state. 4 (10)(8) "General assets" means all property, real, 5 personal, or otherwise, not specifically mortgaged, pledged, 6 deposited, or otherwise encumbered for the security or benefit 7 of specified persons or a limited class or classes of persons, and as to such specifically encumbered property the term 8 9 includes all such property or its proceeds in excess of the 10 amount necessary to discharge the sum or sums secured thereby. Assets held in trust and assets held on deposit for the 11 12 security or benefit of all policyholders or all policyholders 13 and creditors in the United States shall be deemed general 14 assets. 15 (11) "Good faith," as applied to a transferee or transferor under this part, means honesty in fact and 16 17 intention and includes the exercise of reasonable business 18 judgment, together with the absence of information that would lead a reasonable person in the same position to know that the 19 20 insurer is financially impaired or insolvent and together with 21 the absence of knowledge regarding the imminence or pendency of any receivership proceeding against the insurer. 22 (12)(9) "Impairment of capital" means that the minimum 23 24 surplus required to be maintained in s. 624.408 has been 25 dissipated and the insurer is not possessed of assets at least 26 equal to all its liabilities together with its total issued 27 and outstanding capital stock, if a stock insurer, or the 28 minimum surplus or net trust fund required by s. 624.407, if a mutual, reciprocal, or business trust insurer. 29 30 (13)(10) "Impairment of surplus" means that the 31 surplus of a stock insurer, the additional surplus of a mutual

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or reciprocal insurer, or the additional net trust fund of a 1 2 business trust insurer does not comply with the requirements 3 of s. 624.408. 4 (14) "Insolvency" means that all the assets of the 5 insurer, if made immediately available, would not be sufficient to discharge all its liabilities or that the 6 7 insurer is unable to pay its debts as they become due in the usual course of business. When the context of any provision of 8 this code so indicates, insolvency also includes and is 9 10 defined as "impairment of surplus," as defined in subsection 11 (13)(9), and "impairment of capital," as defined in subsection 12 (12) (8). 13 (15)(12) "Insurer," in addition to persons so defined under s. 624.03, also includes persons purporting to be 14 15 insurers or organizing, or holding themselves out as 16 organizing, in this state for the purpose of becoming insurers 17 and all insurers who have insureds resident in this state. (16)(13) "Liabilities," as used in subsections(12) 18 and $(14)\frac{(8)-(10)}{(8)-(10)}$, means all liabilities, including those 19 20 specifically required in s. 625.041. 21 (17)(14) "Person" includes natural persons, 22 corporations, partnerships, trusts, estates, and sole 23 proprietorships. 24 (18) "Property," with respect to an insolvent entity, includes all right, title, and interest of the insolvent 25 entity whether legal or equitable, tangible or intangible, or 26 27 choate or inchoate and includes choses in action, contract rights, and any other interest recognized under the laws of 28 this state. When an order of conservation, rehabilitation, or 29 30 liquidation is entered, the term also includes entitlements 31 that existed prior to the entry of the order and those that

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may arise by operation of the provisions of this chapter or 1 2 other provisions of law allowing the department to avoid prior 3 transfers or assert other rights in its capacity as receiver. 4 The term also includes all records and data that are otherwise the property of the insolvent insurer, however stored, 5 6 including, but not limited to, claims and claim files, 7 application files, litigation files, premium records, rate books, underwriting manuals, personnel records, or financial 8 records, or similar records within the possession, custody, or 9 10 control of a managing general agent, third-party administrator, management company, accountant, attorney, 11 12 affiliate, or other person. The term does not include privileged or confidential documents of an insolvent insurer 13 14 generated by a third party. (19)(15) "Receiver" means a receiver, liquidator, 15 16 rehabilitator, or conservator, as the context may require. 17 (20)(16) "Reciprocal state" means any state other than this state in which in substance and effect the provisions of 18 the Insurers Rehabilitation and Liquidation Act are in force, 19 20 including the provisions requiring that the commissioner of 21 insurance or equivalent insurance supervisory official be the receiver of a delinquent insurer. 22 (21)(17) "Secured claim" means any claim secured by 23 24 mortgage, trust deed, pledge, deposit as security, escrow, or 25 otherwise but does not include a special deposit claim, a 26 claim against general assets, or a claim based on mere 27 possession. The term also includes a claim which more than 4 28 months before the commencement of a delinquency proceeding in the state of the insurer's domicile has become a lien upon 29 30 specific assets by reason of judicial process. 31 (22)(18) "Special deposit claim" means any claim

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secured by a deposit made pursuant to statute for the security 1 or benefit of a limited class or classes of persons, but not 2 3 including any general assets. 4 (23)(19) "State" is as defined in s. 624.08. 5 Section 21. Section 631.025, Florida Statutes, is 6 created to read: 7 631.025 Persons and entities subject to this 8 part.--Delinquency proceedings authorized by this part may be initiated against any insurer as defined in s. 631.011(15) if 9 10 the statutory grounds are present as to that insurer, and the 11 receivership court may exercise jurisdiction over any person 12 required to cooperate with the department pursuant to s. 13 631.391 and over all persons made subject to the court's jurisdiction by other provisions of law. Such persons include, 14 15 but are not limited to: (1) A person who is transacting or has transacted 16 17 insurance business in or from this state and against whom 18 claims arising from that business exist or may exist in the future. 19 20 (2) A person who purports to transact an insurance 21 business in this state, and any person or entity who acts as an insurer, transacts insurance, or otherwise engages in 22 insurance activities in or from this state, with or without a 23 24 certificate of authority or proper authority from the 25 department. (3) An insurer who has insureds residing in this 26 27 state. 28 (4) All other persons organized or in the process of 29 organizing with the intent to transact an insurance business 30 in this state. Section 22. Paragraph (d) of subsection (1) of section 31 23 4:15 PM 05/01/01 s1906.bi19.0f

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631.041, Florida Statutes, is amended, and subsection (6) is 1 2 added to that section, to read: 3 631.041 Automatic stay; relief from stay; 4 injunctions.--5 (1) An application or petition under s. 631.031 б operates as a matter of law as an automatic stay applicable to 7 all persons and entities, other than the receiver, which shall be permanent and survive the entry of an order of 8 conservation, rehabilitation, or liquidation, and which shall 9 10 prohibit: (d) Any act to create, perfect, or enforce a lien 11 12 against property of the insurer, except that a secured claim 13 as defined in s. $631.011(21)\frac{(17)}{(17)}$ may proceed under s. 631.19114 after the order of liquidation is entered; 15 (6) No statute of limitations or defense of laches 16 shall run with respect to any action by or against an insurer 17 between the filing of a petition for conservation, 18 rehabilitation, or liquidation against an insurer and the order granting or denying that petition. If the petition is 19 20 denied, any action against the insurer that might have been 21 commenced when the petition was filed may be commenced for at least 60 days after the order denying such relief. 22 Section 23. Section 631.113, Florida Statutes, is 23 24 created to read: 631.113 Extension of time.--25 26 (1) The running of any unexpired statute of 27 limitations as to any claims brought by the administrator, 28 conservator, rehabilitator, receiver, or liquidator, or an 29 official or agency exercising powers pursuant to this chapter 30 seeking damages or other recoveries on behalf of an insurer, 31 its policyholders, its creditors, or its estate, shall be

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tolled for a period of 4 years from the entry of an order 1 placing the administrator, conservator, rehabilitator, 2 3 receiver, liquidator, or similar official or agency over the 4 insurer, provided, if the delinquency proceedings brought pursuant to this chapter against the insurer terminate in less 5 6 than 4 years, such tolling shall cease at the time when the 7 proceedings are finally concluded, including all appeals therefrom. Further, the right of action does not accrue and 8 the limitations period for any such action does not run during 9 10 the time when the insurer is controlled by parties acting contrary to the company's interests or when the facts giving 11 12 rise to such claim are fraudulently concealed from regulatory 13 authorities or from any members of company management. The provisions of chapter 95 shall be construed so as to be 14 15 consistent with the provisions of this section. The receiver 16 may institute any action or proceeding on behalf of the estate 17 of the insurer while any statute of limitation is tolled pursuant to this section. The tolling shall be in addition to 18 any other applicable tolling provision. 19 (2) For actions not covered by subsection (1), if any 20 21 unexpired time period is fixed, by any agreement or in any proceeding, for doing any act for the benefit of the estate, 22 the receiver shall have 180 days, or such longer period as the 23 24 receivership court may allow for good cause shown, from the entry of the order of rehabilitation or liquidation to perform 25 26 the act. 27 Section 24. Present subsections (6) through (9) of 28 section 631.141, Florida Statutes, are renumbered as subsections (7) through (10), respectively, and a new 29 30 subsection (6) is added to that section to read: 631.141 Conduct of delinquency proceeding; domestic 31 25 4:15 PM 05/01/01

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and alien insurers.--1 2 (6) The department as receiver is vested with and may 3 assert all rights belonging to policyholders, creditors, and 4 the estate as well as all rights of the entity or entities in receivership, except to the extent that an individual claim is 5 personal and unique to that claimant and recovery thereon б 7 could not inure to the benefit of the estate or to other 8 claimants. Section 25. Paragraph (d) of subsection (6) of section 9 10 631.154, Florida Statutes, is amended to read: 11 631.154 Funds or other property in the possession of 12 third person. --(6) Should the receiver be successful in establishing 13 14 its claim or any part thereof, the receiver shall be entitled 15 to recover judgment for the following: 16 (d) All costs, investigative and other expenses, which 17 include the department's in-house staff and staff attorney's 18 expenses, costs, and salaries, expended in necessary to the 19 recovery of the property or funds, and reasonable attorney's 20 fees. 21 Section 26. Section 631.156, Florida Statutes, is created to read: 22 631.156 Investigation by the department.--23 24 (1) Preliminary or incidental to a petition for receivership proceedings, the department may, and if appointed 25 receiver shall, undertake a full investigation to determine 26 27 the causes and reasons for the insolvency, the discovery and 28 location of assets to be recovered, the recovery of such assets, whether the filing of false statements with the 29 30 department contributed to the insolvency, and, in conjunction 31 with the department's Division of Insurance Fraud or any other 26

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appropriate agency of state or federal government, whether any 1 law of this state, any other state, or the Federal Government 2 3 relating to the solvency of the insurer has been violated. In 4 the furtherance of such investigation, the department may: 5 (a) Examine and review any and all documents that are 6 reasonably calculated to disclose or lead to the disclosure of 7 the causes and reasons for the insolvency, the discovery and location of assets to be recovered, the recovery of such 8 assets, the truth or falsity of statements filed with the 9 10 department, and whether any law of this state, any other state, or the Federal Government has been violated. 11 12 (b) Take statements or depositions under oath of any 13 person whose testimony is reasonably calculated to disclose or lead to the disclosure of the causes and reasons for the 14 15 insolvency, the discovery of and location of assets to be recovered, the recovery of such assets, the truth or falsity 16 17 of statements filed with the department, and whether any law 18 of this state, any other state, or the Federal Government has been violated. 19 (c) Request the court having jurisdiction over the 20 21 receivership proceedings to issue any necessary subpoenas. (d) Examine and review the books, records, and 22 documents of any affiliate, controlling person, officer, 23 24 director, manager, trustee, agent, adjuster, employee, or independent contractor of any insurer or affiliate and any 25 other person who possesses any executive authority over, or 26 27 who exercises or has exercised any control over, any segment 28 of the affairs of the insurer or affiliate, to the extent such 29 examination is reasonably calculated to disclose or lead to 30 the disclosure of the causes and reasons for the insolvency, 31 the discovery and location of assets to be recovered, the

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recovery of such assets, the truth or falsity of statements 1 filed with the department, and whether any law of this state, 2 3 any other state, or the Federal Government has been violated. 4 (2) In its capacity as receiver, the department may 5 provide documents, books and records, other investigative products, work product, and analysis, including copies of any 6 7 or all of the foregoing items, to the Division of Insurance Fraud or any other appropriate agency of state or federal 8 government. The sharing of information, investigative 9 10 products, or analysis shall not waive any work product or 11 other privilege that would otherwise apply under common law, 12 chapter 119, or any other law. (3) The department, as the court's receiver, is 13 granted the discretion to determine what books, records, 14 15 documents, or testimony would be reasonably calculated to disclose or lead to the disclosure of the causes and reasons 16 17 for the insolvency, the discovery and location of assets to be 18 recovered, the recovery of the assets, the truth or falsity of statements filed with the department, and whether any law of 19 this state or of the United States has been violated, subject 20 21 to the court's power to review such determination or appoint a general master to review such determination. A party 22 asserting that any documents requested by the department under 23 this section are not subject to review, or that any particular 24 testimony may not be obtained, shall present such contention 25 by written motion to the receivership court within 20 days 26 27 after receipt of the request and shall be fully responsible 28 for the loss of any evidence which occurs after the department first informs said party of its request therefor. The court 29 30 shall, as expeditiously as possible, determine whether the department has abused its discretion in seeking such evidence 31 28

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or testimony, with the objecting party having the burden of 1 2 proof. A party who fails to produce the requested evidence or 3 testimony without filing a proper timely objection, or who 4 having unsuccessfully asserted such objection fails thereafter to furnish the evidence or testimony, within the time provided 5 6 by the court or the department, shall be subject to the 7 contempt powers of the court, in addition to any other applicable penalties which may be provided in the Florida 8 Insurance Code or other law. 9 10 Section 27. Section 631.157, Florida Statutes, is 11 created to read: 12 631.157 Civil action by the receiver.--13 (1) Any person who is engaged in the business of insurance or who acts as or is an officer, director, agent, or 14 15 employee of any person engaged in the business of insurance, or is involved, other than as an insured or beneficiary under 16 17 a policy of insurance, in a transaction relating to the 18 conduct of affairs of such a business, and who willfully obtains or uses, as defined in s. 812.012(2), any asset or 19 property, including, but not limited to, moneys, funds, 20 21 premiums, credits, or other property of an insurer, shall be liable to the department as receiver for the use and benefit 22 of an insolvent insurer's estate, creditors, and 23 24 policyholders, as follows: (a) If such obtaining or using did not jeopardize the 25 safety and soundness of an insurer and was not a significant 26 27 cause of such insurer's being placed in conservation, 28 rehabilitation, or liquidation, such person shall be liable only for the full amount of any asset obtained or used, plus 29 30 prejudgment interest provided by law. 31 (b) If such obtaining or using jeopardized the safety 29

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and soundness of an insurer or was a significant cause of such 1 insurer's being placed in conservation, rehabilitation, or 2 3 liquidation, such person shall be liable for triple the full 4 amount of any asset obtained or used, plus prejudgment interest provided by law on the original amount. 5 (2) Any person who is engaged in the business of б 7 insurance or who acts as or is an officer, director, agent, or employee of any person engaged in the business of insurance, 8 or is involved, other than as an insured or beneficiary under 9 10 a policy of insurance, in a transaction relating to the conduct of affairs of such a business, and who, while having 11 12 actual knowledge or such constructive knowledge as should have 13 been obtained through reasonable inquiry by a person in such position, if such person knowingly misreports, or knowingly 14 15 makes any false entry of, a material fact in any book, report, 16 or statement of an insurer with the intent to deceive such 17 insurer, including any officer, employee, or agent of such insurer, the department, or any agent or examiner appointed by 18 the department to examine the affairs of such person or of the 19 insurer, concerning the financial condition or solvency of 20 21 such business, shall be liable to the department as receiver for the use and benefit of an insolvent insurer's estate, 22 creditors, and policyholders, as follows: 23 24 (a) If such misreporting did not jeopardize the safety and soundness of an insurer and was not a significant cause of 25 such insurer's being placed in conservation, rehabilitation, 26 27 or liquidation, such person shall be liable only for the full 28 amount of any asset misreported. 29 (b) If such misreporting jeopardized the safety and 30 soundness of an insurer or was a significant cause of such insurer's being placed in conservation, rehabilitation, or 31

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liquidation, such person shall be liable for triple the full 1 2 amount of any asset misreported. 3 If the asset or property that has been obtained or (3) 4 used was reported to the department as being available to the insurer as an admitted asset and such asset is unavailable to 5 6 the receiver for payment of the obligations of the insurer at 7 the time when a receivership proceeding is instituted, the obtaining or using shall be presumed to have jeopardized the 8 safety and soundness of the insurer and to have been a 9 10 significant cause of such insurer's being placed in conservation, rehabilitation, or liquidation, with the burden 11 12 of proof on the defendants to show otherwise. (4) If the receiver is successful in establishing a 13 claim under this section, the receiver shall be entitled to 14 15 recover all of its costs, investigative and other expenses, which shall include the department's in-house staff and staff 16 17 attorney's expenses, costs, and salaries, expended in the 18 prosecution of the action, and reasonable attorney's fees. The receiver shall be exempt from the provisions of s. 57.111. 19 (5) An action under this section may be brought at any 20 21 time before the expiration of 4 years after the entry of the initial order of rehabilitation or liquidation under this part 22 but shall be filed before the time the receivership proceeding 23 24 is closed or dismissed. Section 28. Paragraph (b) of subsection (1) of section 25 631.57, Florida Statutes, is amended to read: 26 27 631.57 Powers and duties of the association .--(1) The association shall: 28 (b) Be deemed the insurer to the extent of its 29 30 obligation on the covered claims, and, to such extent, shall 31 have all rights, duties, defenses, and obligations of the 31

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insolvent insurer as if the insurer had not become insolvent. 1 2 In no event shall the association be liable for any penalties 3 or interest. 4 Section 29. Section 631.3995, Florida Statutes, is 5 created to read: 631.3995 Closing of estate; Closed Estate Fund Trust 6 7 Account.--8 (1) When all assets justifying the expense of collection and distribution have been marshaled and 9 10 distributed under this part, the department shall petition the court to terminate the liquidation proceedings and to close 11 12 the estate. The court may grant such other relief as may be appropriate, including, but not limited to, a full discharge 13 14 of all liability and responsibility of the liquidator, the 15 reservation of assets for administrative expenses incurred in the closing of the estate, and any other actions the 16 17 department feels necessary or appropriate for closing the 18 estate. 19 (2) Any remaining reserved assets that are provided for in subsection (1) and that may not be practicably or 20 21 economically distributed to claimants shall be deposited into a segregated account to be known as the Closed Estate Fund 22 Trust Account, if created by law. The department may use 23 24 moneys held in the account for paying the administrative 25 expenses of companies subject to this part that lack sufficient assets to allow the department to perform its 26 27 duties and obligations under this part. An annual audit of the 28 Closed Estate Fund Trust Account shall be performed regardless 29 of its balance. 30 (3) The department may petition the court to reopen 31 the proceedings for good cause shown, including the marshaling 32 4:15 PM 05/01/01 s1906.bi19.0f

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of additional assets, and the court may enter such other 1 2 orders as may be deemed appropriate. 3 Section 30. Subsection (3) of section 631.54, Florida 4 Statutes, is amended to read: 631.54 Definitions.--As used in this part: 5 (3) "Covered claim" means an unpaid claim, including 6 7 one of unearned premiums, which arises out of, and is within the coverage, and not in excess of, the applicable limits of 8 9 an insurance policy to which this part applies, issued by an 10 insurer, if such insurer becomes an insolvent insurer after October 1, 1970, and the claimant or insured is a resident of 11 12 this state at the time of the insured event or the property from which the claim arises is permanently located in this 13 state. "Covered claim" shall not include any amount due any 14 15 reinsurer, insurer, insurance pool, or underwriting association, as subrogation, contribution, indemnification, 16 17 recoveries or otherwise. Member insurers shall have no right of subrogation against the insured of any insolvent member. 18 19 Section 31. Section 817.2341, Florida Statutes, is 20 created to read: 21 817.2341 Crimes by or affecting persons engaged in the administration of any insurer or entity organized pursuant to 22 chapter 624 or chapter 641.--23 24 (1)(a) Any person who makes a false entry of a material fact in any book, report, or statement relating to a 25 26 transaction of an insurer or entity organized pursuant to 27 chapter 624 or chapter 641, intending thereby to deceive any 28 person about the financial condition or solvency of such 29 insurer or entity, commits a felony of the third degree, 30 punishable as provided in s. 775.082, s. 775.083, or s. 31 775.084.

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1	(b) If such false entry of a material fact is made		
2	with the intent to deceive any person as to the impairment of		
3	capital, as defined in s. 631.011(12), of such insurer or		
4	entity or is the significant cause of such insurer or entity		
5	being placed in conservation, rehabilitation, or liquidation		
6	by a court, the offense is a felony of the first degree,		
7	punishable as provided in s. 775.082, s. 775.083, or s.		
8	775.084.		
9	(2)(a) Any person who knowingly makes a material false		
10	statement or report to the department or any agent of the		
11	department, or who knowingly and materially overvalues any		
12	property in any document or report prepared to be presented to		
13	the department or any agent of the department, commits a		
14	felony of the third degree, punishable as provided in s.		
15	775.082, s. 775.083, or s. 775.084.		
16	(b) If such material false statement or report or such		
17	material overvaluation is made with the intent to deceive any		
18	person as to the impairment of capital, as defined in s.		
19	631.011(12), of an insurer or entity organized pursuant to		
20	chapter 624 or chapter 641, or is the significant cause of		
21	such insurer or entity being placed in conservation,		
22	rehabilitation, or liquidation by a court, the offense is a		
23	felony of the first degree, punishable as provided in s.		
24	775.082, s. 775.083, or s. 775.084.		
25			
26	(Redesignate subsequent sections.)		
27			
28			
29	======================================		
30	And the title is amended as follows:		
31	On page 1, line 10, after the semicolon,		
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1 insert:

-	THECTC	-
2		amending ss. 624.3161, 626.171, F.S.; directing
3		the department to adopt rules relating to
4		market conduct examinations and license
5		applications; amending s. 626.9541, F.S.;
6		revising provisions relating to unfair
7		competition and deceptive practices; creating
8		626.9552, F.S.; providing standards for single
9		interest insurance; amending s. 627.062, F.S.;
10		providing for filing forms for rate standards;
11		amending s. 627.0625, F.S.; authorizing the
12		department to adopt rules relating to
13		third-party claimants; amending s. 627.0651,
14		F.S.; prohibiting motor vehicle insurers from
15		imposing a surcharge or a discount due to
16		certain factors; creating s. 627.385, F.S.;
17		providing rules of conduct for residual market
18		board members; creating s. 627.4065, F.S.;
19		providing for notice of right to return health
20		insurance policies; creating s. 627.41345,
21		F.S.; prohibiting an insurer or agent from
22		issuing or signing certain certificates of
23		insurance; providing that the terms of the
24		policy control in case of conflict; amending s.
25		627.7015, F.S.; defining the term "claim" for
26		purposes of alternative procedures for
27		resolving disputed property insurance claims;
28		amending s. 627.7276, F.S.; providing for
29		notice of coverage of automobile policies;
30		creating s. 627.795, F.S.; providing guidelines
31		for title insurance policies; amending s.
		25

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1 627.918, F.S.; directing the department to 2 adopt rules relating to reporting formats; 3 amending s. 641.3108, F.S.; requiring health 4 maintenance organizations to provide certain 5 information to subscriber groups whose contract is not renewed for certain reasons; creating s. б 7 626.9651, F.S.; directing the department to adopt rules to govern the use of a consumer's 8 9 nonpublic personal financial and health 10 information by health insurers and health maintenance organizations; providing standards 11 12 governing the rules; amending s. 631.001, F.S.; 13 providing construction and purposes; providing a short title; amending s. 631.011, F.S.; 14 providing additional definitions; creating s. 15 16 631.025, F.S.; specifying application to 17 certain persons and entities; amending s. 631.041, F.S.; limiting application of certain 18 time restrictions; correcting a 19 20 cross-reference; creating s. 631.113, F.S.; 21 providing for tolling certain time limitations in certain actions; amending s. 631.141, F.S.; 22 vesting the Department of Insurance with 23 24 certain rights as receiver; amending s. 631.154, F.S.; including certain costs and 25 26 expenses of the department in costs and 27 expenses entitled to be recovered by the 28 receiver under certain circumstances; creating s. 631.156, F.S.; providing for investigations 29 30 by the department preliminary or incidental to receivership proceedings; providing department 31

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1	powers; authorizing the department to provide
2	certain information in such investigations;
3	granting the department certain discretionary
4	powers; creating s. 631.157, F.S.; imposing
5	liability on certain persons or entities for
6	certain actions; specifying amounts of damages;
7	providing construction; providing costs and
8	expenses entitled to be recovered by the
9	receiver under certain circumstances; providing
10	a time certain for bringing certain actions;
11	amending s. 631.57, F.S.; clarifying that the
12	association has the same legal defenses
13	available to the insolvent insurer; creating s.
14	631.3995, F.S.; providing procedures and
15	requirements for closing an estate; providing
16	for deposit of certain assets into the Closed
17	Estate Fund Trust Account; providing for uses
18	of such account; providing for reopening
19	certain proceedings; amending s. 631.54, F.S.;
20	revising a definition; creating s. 817.2341,
21	F.S.; providing criminal penalties for certain
22	activities;
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