## By Senator Alexander

## 17-1054-05

| 1  | A bill to be entitled                           |
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| 2  | An act relating to offenses involving           |
| 3  | insurance; amending s. 400.9935, F.S.;          |
| 4  | providing for health care clinics to post signs |
| 5  | with information about a reward program for     |
| 6  | information leading to conviction of certain    |
| 7  | offenses; providing for inspections of such     |
| 8  | clinics by employees of the Division of         |
| 9  | Insurance Fraud; amending s. 440.105, F.S.;     |
| 10 | increasing penalties for employers unlawfully   |
| 11 | failing to secure workers' compensation         |
| 12 | insurance when an employee is injured by or     |
| 13 | dies from a work-related injury; amending s.    |
| 14 | 624.15, F.S.; providing criminal penalties for  |
| 15 | violations of emergency rules or orders of the  |
| 16 | Department of Financial Services; amending s.   |
| 17 | 624.155, F.S.; revising provisions that         |
| 18 | authorize a civil cause of action for           |
| 19 | violations of the requirement for a certificate |
| 20 | of authority to act as an insurer; amending s.  |
| 21 | 626.112, F.S.; providing criminal penalties for |
| 22 | transacting insurance or engaging in insurance  |
| 23 | activities without a license; amending s.       |
| 24 | 626.901, F.S.; stating that independently       |
| 25 | procured coverage constitutes an exception to   |
| 26 | the prohibition on representing an unauthorized |
| 27 | entity only when transacted outside the state;  |
| 28 | amending s. 626.938, F.S.; providing that       |
| 29 | independently procured coverage must be         |
| 30 | accomplished outside the state, must be         |
| 31 | procured through an unauthorized insurer        |

1 licensed in some other state or country, and is 2 not available for life, health, or workers' compensation insurance; amending s. 626.989, 3 4 F.S.; allowing insurers, agents, and other 5 licensees, their employees, and self-insured 6 entities contracting or associated with the 7 National Insurance Crime Bureau to report 8 fraudulent insurance acts; authorizing adoption of rules for reporting suspected fraudulent 9 10 activity; amending s. 817.234, F.S.; providing that it is insurance fraud for a service 11 12 provider to agree or intend to waive 13 deductibles; providing criminal penalties for scheming to create documentation of a 14 nonexistent motor vehicle accident; amending s. 15 817.2361, F.S.; providing criminal penalties 16 17 for creating, marketing, or presenting any false or fraudulent proof of motor vehicle 18 insurance; amending s. 817.50, F.S.; providing 19 that giving false or fictitious information to 20 21 a health care provider is not prima facie 22 evidence of intent to defraud when done by a 23 law enforcement officer during an investigation; amending s. 817.505, F.S.; 2.4 providing criminal penalties for soliciting or 25 receiving compensation or receiving a split-fee 26 27 arrangement for acceptance or acknowledgement 2.8 of treatment from a health care provider or health care facility; redefining the term 29 30 "health care provider or health care facility"; amending s. 843.08, F.S.; providing criminal 31

penalties for falsely personating an officer of 2 the Department of Financial Services; providing severability; providing an effective date. 3 4 Be It Enacted by the Legislature of the State of Florida: 5 6 7 Section 1. Subsection (13) is added to section 400.9935, Florida Statutes, to read: 8 9 400.9935 Clinic responsibilities.--10 (13) The clinic shall display a sign in a conspicuous location within the clinic readily visible to all patients 11 12 indicating that, pursuant to s. 626.9892, the Department of 13 Financial Services may pay rewards of up to \$25,000 to persons providing information leading to the arrest and conviction of 14 persons committing crimes investigated by the Division of 15 Insurance Fraud arising from violations of s. 440.105, s. 16 624.15, s. 626.9541, s. 626.989, or s. 817.234. An authorized employee of the Division of Insurance Fraud may make 18 unannounced inspections of a clinic licensed under this part 19 as necessary to determine whether the clinic is in compliance 2.0 21 with this subsection. A licensed clinic shall allow full and 22 complete access to the premises to such authorized employee of 23 the division who makes an inspection to determine compliance with this subsection ... 2.4 Section 2. Subsection (4) of section 440.105, Florida 2.5 26 Statutes, is amended to read: 27 440.105 Prohibited activities; reports; penalties; 2.8 limitations.--(4) <u>Unless otherwise specifically provided</u>, whoever 29 violates any provision of this subsection commits insurance 30 fraud, punishable as provided in paragraph (f).

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- (a) It shall be unlawful for any employer to knowingly:
- 1. Present or cause to be presented any false, fraudulent, or misleading oral or written statement to any person as evidence of compliance with s. 440.38.
- 2. Make a deduction from the pay of any employee entitled to the benefits of this chapter for the purpose of requiring the employee to pay any portion of premium paid by the employer to a carrier or to contribute to a benefit fund or department maintained by such employer for the purpose of providing compensation or medical services and supplies as required by this chapter.
- 3. Fail to secure <u>worker's</u> <del>payment of</del> compensation <u>coverage</u> if required to do so by this chapter.
- a. However, if an employer knowingly fails to secure workers' compensation coverage for an employee when required by this chapter and such employee subsequently suffers a work-related injury requiring hospitalization, the employer commits a felony of the second degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.
- b. However, if an employer knowingly fails to secure workers' compensation coverage for an employee when required by this chapter and such employee subsequently suffers a work-related death, the employer commits a felony of the first degree, punishable as provided in s. 775.082, s. 775.083, or s.775.084.
  - (b) It is shall be unlawful for any person:
- 1. To knowingly make, or cause to be made, any false, fraudulent, or misleading oral or written statement for the purpose of obtaining or denying any benefit or payment under this chapter.

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- 2. To present or cause to be presented any written or oral statement as part of, or in support of, a claim for payment or other benefit pursuant to any provision of this chapter, knowing that such statement contains any false, incomplete, or misleading information concerning any fact or thing material to such claim.
- 3. To prepare or cause to be prepared any written or oral statement that is intended to be presented to any employer, insurance company, or self-insured program in connection with, or in support of, any claim for payment or other benefit pursuant to any provision of this chapter, knowing that such statement contains any false, incomplete, or misleading information concerning any fact or thing material to such claim.
- 4. To knowingly assist, conspire with, or urge any person to engage in activity prohibited by this section.
- 5. To knowingly make any false, fraudulent, or misleading oral or written statement, or to knowingly omit or conceal material information, required by s. 440.185 or s. 440.381, for the purpose of obtaining workers' compensation coverage or for the purpose of avoiding, delaying, or diminishing the amount of payment of any workers' compensation premiums.
- 6. To knowingly misrepresent or conceal payroll, classification of workers, or information regarding an employer's loss history which would be material to the computation and application of an experience rating modification factor for the purpose of avoiding or diminishing the amount of payment of any workers' compensation premiums.
- 7. To knowingly present or cause to be presented any false, fraudulent, or misleading oral or written statement to

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any person as evidence of compliance with s. 440.38, as evidence of eligibility for a certificate of exemption under s. 440.05.

- 8. To knowingly violate a stop-work order issued by the department pursuant to s. 440.107.
- 9. To knowingly present or cause to be presented any false, fraudulent, or misleading oral or written statement to any person as evidence of identity for the purpose of obtaining employment or filing or supporting a claim for workers' compensation benefits.
- (c) It shall be unlawful for any physician licensed under chapter 458, osteopathic physician licensed under chapter 459, chiropractic physician licensed under chapter 460, podiatric physician licensed under chapter 461, optometric physician licensed under chapter 463, or any other practitioner licensed under the laws of this state to knowingly and willfully assist, conspire with, or urge any person to fraudulently violate any of the provisions of this chapter.
- (d) It shall be unlawful for any person or governmental entity licensed under chapter 395 to maintain or operate a hospital in such a manner so that such person or governmental entity knowingly and willfully allows the use of the facilities of such hospital by any person, in a scheme or conspiracy to fraudulently violate any of the provisions of this chapter.
- (e) It shall be unlawful for any attorney or other person, in his or her individual capacity or in his or her capacity as a public or private employee, or any firm, corporation, partnership, or association, to knowingly assist,

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conspire with, or urge any person to fraudulently violate any of the provisions of this chapter.

- $\mbox{\ensuremath{(f)}}$  If the monetary value of any violation of this subsection:
- 1. 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.
- 2. Is \$20,000 or more, but less than \$100,000, the offender commits a felony of the second degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.
- 3. Is \$100,000 or more, the offender commits a felony of the first degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.
- Section 3. Section 624.15, Florida Statutes, is amended to read:

624.15 General penalty.--

- (1) Each willful violation of this code or department rule as to which a greater penalty is not provided by another provision of this code or department rule or by other applicable laws of this state is a misdemeanor of the second degree and is, in addition to any prescribed applicable denial, suspension, or revocation of certificate of authority, license, or permit, punishable as provided in s. 775.082 or s. 775.083. Each instance of such violation shall be considered a separate offense.
- (2) Each willful violation of an emergency rule or order set forth by the department is a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s, 775.084, in addition to any prescribed applicable denial, suspension, or revocation of a certificate of authority,

license, or permit. Each instance of such violation is a 2 separate offense. Section 4. Subsection (2) of section 624.155, Florida 3 Statutes, is amended to read: 4 5 624.155 Civil remedy.--6 (2) Any party may bring a civil action against any person acting as an unauthorized insurer without a certificate 8 of authority if such party is damaged by a violation of s. 9 624.401 by that person the unauthorized insurer. 10 Section 5. Subsection (9) is added to section 626.112, Florida Statutes, to read: 11 12 626.112 License and appointment required; agents, 13 customer representatives, adjusters, insurance agencies, service representatives, managing general agents. --14 (9) Any person who transacts insurance or otherwise 15 engages in insurance activities in this state without a 16 license in violation of this section commits a felony of the 18 third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084. 19 Section 6. Paragraph (d) of subsection (4) of section 20 21 626.901, Florida Statutes, is amended to read: 22 626.901 Representing or aiding unauthorized insurer 23 prohibited. --(4) This section does not apply to: 2.4 25 Independently procured coverage written pursuant 26 to s. 626.938 which is not solicited, marketed, negotiated, or 27 sold within this state. 2.8 Section 7. Subsections (1), (2), and (9) of section 626.938, Florida Statutes, are amended to read: 29 30 626.938 Report and tax of independently procured 31 coverages.--

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- (1) Every insured who resides in this state and procures or causes to be procured or continues or renews insurance from another state or country with an unauthorized foreign or alien insurer <u>legitimately licensed in that other</u> jurisdiction, or any self-insurer who resides in this state and so procures or continues excess loss, catastrophe, or other insurance, upon a subject of insurance resident, located, or to be performed within this state, other than insurance procured through a surplus lines agent pursuant to the Surplus Lines Law of this state or exempted from tax under s. 626.932(4), shall, within 30 days after the date such insurance was so procured, continued, or renewed, file a report of the same with the Florida Surplus Lines Service Office in writing and upon forms designated by the Florida Surplus Lines Service Office and furnished to such an insured upon request, or in a computer readable format as determined by the Florida Surplus Lines Service Office. The report shall show the name and address of the insured or insureds, the name and address of the insurer, the subject of the insurance, a general description of the coverage, the amount of premium currently charged therefor, and such additional pertinent information as is reasonably requested by the Florida Surplus Lines Service Office.
- (2) Any insurance in an unauthorized insurer

  legitimately licensed in another state or country procured

  through solicitations, negotiations, or an application, in

  whole or in part occurring or made outside within or from

  within this state, or for which premiums in whole or in part

  are remitted directly or indirectly from within this state,

  shall be deemed to be insurance procured, continued, or

  renewed in this state within the intent of subsection (1).

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(9) This section does not <u>authorize independent</u>

<u>procurement of workers' compensation insurance, apply as to</u>

life insurance, or health insurance.

Section 8. Subsection (6) of section 626.989, Florida Statutes, is amended to read:

626.989 Investigation by department or Division of Insurance Fraud; compliance; immunity; confidential information; reports to division; division investigator's power of arrest.--

(6) Any person, other than an insurer, agent, or other person licensed under the code, or an employee thereof, having knowledge or who believes that a fraudulent insurance act or any other act or practice which, upon conviction, constitutes a felony or a misdemeanor under the code, or under s. 817.234, is being or has been committed may send to the Division of Insurance Fraud a report or information pertinent to such knowledge or belief and such additional information relative thereto as the department may request. However, any professional practitioner licensed or regulated by the Department of Business and Professional Regulation, except as otherwise provided by law, any medical review committee as defined in s. 766.101, any private medical review committee, any self-insured entity contracting or associated with the National Insurance Crime Bureau, and any insurer, agent, or other person licensed under the code, or an employee thereof, having knowledge or who believes that a fraudulent insurance act or any other act or practice which, upon conviction, constitutes a felony or a misdemeanor under the code, or under s. 817.234, is being or has been committed shall send to the Division of Insurance Fraud a report or information pertinent to such knowledge or belief and such additional information

relative thereto as the department may require. The Division of Insurance Fraud shall review such information or reports 2 and select such information or reports as, in its judgment, 3 may require further investigation. It shall then cause an 4 5 independent examination of the facts surrounding such 6 information or report to be made to determine the extent, if 7 any, to which a fraudulent insurance act or any other act or 8 practice which, upon conviction, constitutes a felony or a misdemeanor under the code, or under s. 817.234, is being 9 committed. The Division of Insurance Fraud shall report any 10 alleged violations of law which its investigations disclose to 11 12 the appropriate licensing agency and state attorney or other 13 prosecuting agency having jurisdiction with respect to any such violation, as provided in s. 624.310. If prosecution by 14 the state attorney or other prosecuting agency having 15 jurisdiction with respect to such violation is not begun 16 17 within 60 days of the division's report, the state attorney or 18 other prosecuting agency having jurisdiction with respect to such violation shall inform the division of the reasons for 19 the lack of prosecution. The division may adopt rules that set 20 21 forth requirements for the manner in which suspected 22 fraudulent activity shall be reported to the division through 23 the use of a standard referral form. Section 9. Paragraph (a) of subsection (7) and 2.4 subsection (9) of section 817.234, Florida Statutes, are 2.5 amended to read: 26 27 817.234 False and fraudulent insurance claims.--2.8 (7)(a) It shall constitute a material omission and insurance fraud punishable as provided in subsection (11) for 29 any service physician or other provider, other than a 30 hospital, to engage in a general business practice of billing

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amounts as its usual and customary charge, if such provider has agreed with the <u>insured patient</u> or intends to waive deductibles or copayments, or does not for any other reason intend to collect the total amount of such charge. With respect to a determination as to whether a <u>service physician or other</u> provider has engaged in such general business practice, consideration shall be given to evidence of whether the <u>physician or other</u> provider made a good faith attempt to collect such deductible or copayment. This paragraph does not apply to physicians or other providers who waive deductibles or copayments or reduce their bills as part of a bodily injury settlement or verdict.

(9) A person may not organize, plan, or knowingly participate in an intentional motor vehicle crash or a scheme to create documentation of a motor vehicle crash that did not occur for the purpose of making motor vehicle tort claims or claims for personal injury protection benefits as required by s. 627.736. Any person who violates this subsection commits a felony of the second degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084. A person who is convicted of a violation of this subsection shall be sentenced to a minimum term of imprisonment of 2 years.

Section 10. Section 817.2361, Florida Statutes, is amended to read:

817.2361 False or fraudulent <u>proof of</u> motor vehicle insurance <del>card</del>.—Any person who, with intent to deceive any other person, creates, markets, or presents <del>a</del> false or fraudulent <u>proof of</u> motor vehicle insurance <del>card</del> commits a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.

Section 11. Subsection (2) of section 817.50, Florida 2 Statutes, is amended to read: 817.50 Fraudulently obtaining goods, services, etc., 3 4 from a health care provider.--5 (2) If any person gives to any health care provider in this state a false or fictitious name or a false or fictitious 7 address or assigns to any health care provider the proceeds of 8 any health maintenance contract or insurance contract, then 9 knowing that such contract is no longer in force, is invalid, or is void for any reason, such action shall be prima facie 10 evidence of the intent of such person to defraud the health 11 12 care provider. However, this subsection does not apply to 13 investigative actions taken by law enforcement officers for law enforcement purposes in the course of their official 14 15 <u>duties.</u> Section 12. Subsection (1) and paragraph (a) of 16 17 subsection (2) of section 817.505, Florida Statutes, are 18 amended to read: 19 817.505 Patient brokering prohibited; exceptions; penalties.--20 21 (1) It is unlawful for any person, including any 22 health care provider or health care facility, to: 23 (a) Offer or pay any commission, bonus, rebate, kickback, or bribe, directly or indirectly, in cash or in 2.4 kind, or engage in any split-fee arrangement, in any form 25 whatsoever, to induce the referral of patients or patronage 26 27 from a health care provider or health care facility; 2.8 (b) Solicit or receive any commission, bonus, rebate, kickback, or bribe, directly or indirectly, in cash or in 29 30 kind, or engage in any split-fee arrangement, in any form

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whatsoever, in return for referring patients or patronage to a health care provider or health care facility; or

(c) Solicit or receive any commission, bonus, rebate, kickback, or bribe, directly or indirectly, in cash or in kind, or engage in any split-fee arrangement, in any form whatsoever, in return for the acceptance or acknowledgement of treatment from a health care provider or health care facility; or

 $\underline{(d)(c)}$  Aid, abet, advise, or otherwise participate in the conduct prohibited under paragraph (a), or paragraph (c).

- (2) For the purposes of this section, the term:
- (a) "Health care provider or health care facility" means any person or entity licensed, certified, or registered; required to be licensed, certified, or registered; or lawfully exempt from licensure, certification, or registration with the Agency for Health Care Administration; any person or entity that has contracted with the Agency for Health Care Administration to provide goods or services to Medicaid recipients as provided under s. 409.907; a county health department established under part I of chapter 154; any community service provider contracting with the Department of Children and Family Services to furnish alcohol, drug abuse, or mental health services under part IV of chapter 394; any substance abuse service provider licensed under chapter 397; or any federally supported primary care program such as a migrant or community health center authorized under ss. 329 and 330 of the United States Public Health Services Act.
- Section 13. Section 843.08, Florida Statutes, is amended to read:

843.08 Falsely personating officer, etc.--A person who 2 falsely assumes or pretends to be a sheriff, officer of the Florida Highway Patrol, officer of the Fish and Wildlife 3 Conservation Commission, officer of the Department of 4 Environmental Protection, officer of the Department of 5 Transportation, officer of the Department of Corrections, 7 officer of the Department of Financial Services, correctional 8 probation officer, deputy sheriff, state attorney or assistant 9 state attorney, statewide prosecutor or assistant statewide prosecutor, state attorney investigator, coroner, police 10 officer, lottery special agent or lottery investigator, 11 12 beverage enforcement agent, or watchman, or any member of the 13 Parole Commission and any administrative aide or supervisor employed by the commission, or any personnel or representative 14 of the Department of Law Enforcement, and takes upon himself 15 or herself to act as such, or to require any other person to 16 17 aid or assist him or her in a matter pertaining to the duty of 18 any such officer, commits a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 19 775.084; however, a person who falsely personates any such 20 21 officer during the course of the commission of a felony 22 commits a felony of the second degree, punishable as provided 23 in s. 775.082, s. 775.083, or s. 775.084; except that if the commission of the felony results in the death or personal 2.4 injury of another human being, the person commits a felony of 25 26 the first degree, punishable as provided in s. 775.082, s. 27 775.083, or s. 775.084. 2.8 Section 14. If any provision of this act or its application to any person or circumstance is held invalid, the 29 invalidity does not affect other provisions or applications of 30 the act which can be given effect without the invalid

| 1  | provision or application, and to this end the provisions of   |
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| 2  | this act are declared severable.  |
| 3  | Section 15. This act shall take effect July 1, 2005.  |
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| 5  | ********  |
| 6  | SENATE SUMMARY  |
| 7  | Prohibits a variety of actions, generally involving fraudulent practices relating to insurance. (See bill for |
| 8  | details.)   |
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