1

A bill to be entitled

2 An act relating to insurance; amending s. 440.12, F.S.; 3 authorizing payment of workers' compensation benefits on a 4 prepaid card under certain circumstances; requiring the 5 keeping and furnishing, upon request, of certain records; 6 providing for the adoption of rules; amending s. 440.20, 7 F.S.; specifying when an insurer's obligation to pay 8 workers' compensation benefits is satisfied if payment is 9 made on a prepaid card; amending s. 440.49, F.S.; revising 10 the dates applicable to calculations of annual assessments 11 upon certain workers' compensation insurers relating to the special disability trust fund; providing application 12 to specified years and rate filings; amending s. 624.402, 13 14 F.S.; providing an exemption from having to obtain a 15 certificate of authority to insurers that cover only 16 nonresidents of the United States under certain 17 conditions; requiring such insurers to provide certain documentation to the Office of Insurance Regulation; 18 19 requiring certificates, policies, or contracts issued by such insurers to include a disclaimer relating to the 20 21 coverage provided; defining a "nonresident" for purposes 22 of applying the exemption provided to such insurers from 23 having to obtain a certificate of authority; providing 24 penalties applicable to alien insurers who transact 25 insurance without complying with certain provisions; 26 deleting procedures and requirements relating to an 27 exemption from obtaining a certificate of authority 28 provided to alien insurers who issue life insurance

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29 policies and annuity contracts to certain nonresidents; 30 amending s. 624.424, F.S.; revising the timeframes that 31 limit how frequently an insurer may use the same 32 accountant or partner to prepare an annual audited financial report; amending s. 626.207, F.S.; defining the 33 34 term "financial services business"; precluding licensure 35 under the Florida Insurance Code of specified persons who 36 commit specified offenses; providing application to 37 convictions and certain pleas, regardless of adjudication; 38 establishing waiting periods relating to other specified 39 offenses during which time an applicant is disqualified for licensure; granting rulemaking authority to the 40 Department of Financial Services relating to specific 41 42 penalties against licensees; clarifying rulemaking 43 authority relating to penalties against licensees; 44 providing that specified statutory provisions prohibiting 45 prior crimes from being a bar to employment are not applicable to applicants for licensure under the Florida 46 47 Insurance Code; amending s. 626.7451, F.S.; requiring funds collected for an insurer to be held in a bank 48 49 insured by the Federal Deposit Insurance Corporation; 50 amending s. 626.8651, F.S.; revising requirements for a 51 public adjuster apprentice license to include additional 52 qualifying designations; amending s. 627.4133, F.S.; 53 changing the designated person or persons who must be 54 notified by an insurer from the "insured" to the "first-55 named insured" in situations involving the nonrenewal, 56 renewal premium, cancellation, or termination of workers' Page 2 of 37

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57 compensation, employer liability, or certain property and 58 casualty insurance coverage; specifying that the date of 59 cancellation of a workers' compensation or employer's 60 liability policy is the date of the insured's written request to cancel; amending s. 627.4137, F.S.; requiring a 61 62 claimant's request concerning insurance coverage to be 63 served upon the disclosing entity in a specified manner; 64 amending s. 627.7277, F.S.; making a conforming change 65 that specifies the "first-named insured" as the person who 66 is to receive notification of a renewal premium; amending 67 s. 627.728, F.S.; changing the designated person or persons who must be notified by an insurer from the 68 "insured" to the "first-named insured" in certain 69 70 situations involving the cancellation or nonrenewal of 71 motor vehicle insurance coverage; making a conforming 72 change that specifies the "first-named insured's insurance 73 agent" as a person who is to receive certain notifications 74 relating to motor vehicle insurance coverage; amending s. 75 627.7281, F.S.; making a conforming change that specifies 76 the "first-named insured" as the person who is to receive 77 notification of cancellation of motor vehicle insurance 78 coverage; amending s. 634.403, F.S.; exempting certain 79 persons providing service warranties relating to consumer 80 products from licensing requirements under certain circumstances; amending s. 627.442, F.S.; limiting the 81 82 requirement for premium audits of workers' compensation 83 coverage to specified instances; amending s. 627.7295, 84 F.S.; providing application; requiring a certain amount of Page 3 of 37

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85 motor vehicle insurance premium to be paid before the 86 effective date of a policy binder or policy in order to 87 issue the binder or policy; authorizing an insurer to 88 cancel certain motor vehicle insurance policies or binders 89 for nonpayment of premium; removing a restriction 90 requiring payment of the first policy payment of a motor 91 vehicle insurance policy before issuance of a binder or 92 policy when payments are being made in a specified manner; 93 amending s. 626.916, F.S.; revising provisions relating to 94 insurance coverage eligibility for export under the 95 Surplus Lines Law; providing applicability; amending s. 817.234, F.S.; revising a cross-reference; providing civil 96 97 penalties consisting of monetary fines relating to making 98 false and fraudulent insurance claims for the purpose of 99 receiving motor vehicle insurance proceeds; providing 100 escalating monetary fines for repeat offenses; providing a mandatory minimum civil fine relating to certain 101 102 international motor vehicle accident schemes; allocating 103 fine revenues to a specified trust fund for specified 104 purposes; authorizing certain agreements between a 105 defendant and a state attorney relating to the payment of 106 civil fines for making false and fraudulent insurance claims for the purpose of receiving motor vehicle 107 insurance proceeds; providing effective dates. 108 109 110 Be It Enacted by the Legislature of the State of Florida: 111

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Section 1. Subsection (1) of section 440.12, Florida Statutes, is amended to read:

114 440.12 Time for commencement and limits on weekly rate of 115 compensation.—

(1) No Compensation <u>is not</u> shall be allowed for the first 7 days of the disability, except <u>for</u> benefits provided <u>under</u> for in s. 440.13. However, if the injury results in disability of more than 21 days, compensation shall be allowed from the commencement of the disability.

121 (a) All weekly compensation payments, except for the first 122 payment, shall be paid by check or, if authorized by the 123 employee, <u>on a prepaid card pursuant to paragraph (b) or</u> 124 deposited directly into the employee's account at a financial 125 institution. As used in this subsection, the term "financial 126 institution" means a financial institution as defined in s. 127 655.005(1)(h).

128 (b) Upon receipt of authorization by the employee as 129 provided in paragraph (a), a carrier may use a prepaid card to 130 deliver the payment of compensation to an employee if the 131 employee is:

132 <u>1. Provided with at least one means of accessing his or</u> 133 <u>her entire compensation payment once per week without incurring</u> 134 <u>fees;</u>

2. Provided with the ability to make point-of-sale
 purchases without incurring fees from the financial institution
 issuing the prepaid card; and
 3. Provided with the terms and conditions of the prepaid
 card program, including a description of any fees that may be

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140	assessed.
141	(c) Each carrier shall keep a record of all payments made
142	under this subsection, including the time and manner of such
143	payments, and shall furnish these records or a report based on
144	these records to the Division of Insurance Fraud and the
145	Division of Workers' Compensation, upon request.
146	(d) The department may adopt rules to administer this
147	section.
148	Section 2. Paragraph (a) of subsection (1) of section
149	440.20, Florida Statutes, is amended to read:
150	440.20 Time for payment of compensation and medical bills;
151	penalties for late payment
152	(1)(a) Unless it denies compensability or entitlement to
153	benefits, the carrier shall pay compensation directly to the
154	employee as required by ss. 440.14, 440.15, and 440.16, in
155	accordance with the obligations set forth in <u>those</u> such
156	sections. Upon receipt of the employee's authorization as
157	provided for in s. 440.12(1)(a)
158	the carrier's obligation to pay compensation directly to the
159	employee is satisfied when the carrier directly deposits, by
160	electronic transfer or other means, compensation into the
161	employee's account at a financial institution or onto a prepaid
162	card in accordance with s. 440.12(1). As used in this paragraph,
163	the term "financial institution" means a financial institution
164	as defined in s. 655.005(1)(h). Compensation by direct deposit
165	or through the use of a prepaid card is considered paid on the
166	date the funds become available for withdrawal by the employee.
167	Section 3. Paragraph (b) of subsection (9) of section
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168 440.49, Florida Statutes, is amended to read:

169 440.49 Limitation of liability for subsequent injury170 through Special Disability Trust Fund.-

171

(9) SPECIAL DISABILITY TRUST FUND.-

172 (b)1. The Special Disability Trust Fund shall be 173 maintained by annual assessments upon the insurance companies 174 writing compensation insurance in the state, the commercial 175 self-insurers under ss. 624.462 and 624.4621, the assessable mutuals as defined in s. 628.6011, and the self-insurers under 176 177 this chapter, which assessments shall become due and be paid quarterly at the same time and in addition to the assessments 178 179 provided in s. 440.51. The department shall estimate annually in 180 advance the amount necessary for the administration of this 181 subsection and the maintenance of this fund and shall make such 182 assessment in the manner hereinafter provided.

183 2. The annual assessment shall be calculated to produce 184 during the <u>next calendar</u> ensuing fiscal year an amount which, 185 when combined with that part of the balance <u>anticipated to be</u> in 186 the fund on <u>December 31</u> June 30 of the current <u>calendar</u> fiscal 187 year which is in excess of \$100,000, is equal to the average of: 188 a. The sum of disbursements from the fund during the

189 immediate past 3 calendar years, and

b. Two times the disbursements of the most recent calendaryear.

192c. Such assessment rate shall first apply on a calendar193year basis for the period beginning January 1, 2012, and shall194be included in workers' compensation rate filings approved by195the office which become effective on or after January 1, 2012.

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196	The assessment rate effective January 1, 2011, shall also apply
197	to the interim period from July 1, 2011, through December 31,
198	2011, and shall be included in workers' compensation rate
199	filings, whether regular or amended, approved by the office
200	which become effective on or after July 1, 2011. Thereafter, the
201	annual assessment rate shall take effect January 1 of the next
202	calendar year and shall be included in workers' compensation
203	rate filings approved by the office which become effective on or
204	after January 1 of the next calendar year. Assessments shall
205	become due and be paid quarterly.
206	
207	Such amount shall be prorated among the insurance companies
208	writing compensation insurance in the state and the self-
209	insurers. Provided however, for those carriers that have
210	excluded ceded reinsurance premiums from their assessments on or
211	before January 1, 2000, no assessments on ceded reinsurance
212	premiums shall be paid by those carriers until such time as the
213	former Division of Workers' Compensation of the Department of
214	Labor and Employment Security or the department advises each of
215	those carriers of the impact that the inclusion of ceded
216	reinsurance premiums has on their assessment. The department may
217	not recover any past underpayments of assessments levied against
218	any carrier that on or before January 1, 2000, excluded ceded
219	reinsurance premiums from their assessment prior to the point
220	that the former Division of Workers' Compensation of the
221	Department of Labor and Employment Security or the department
222	advises of the appropriate assessment that should have been
223	paid.

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224 The net premiums written by the companies for workers' 3. 225 compensation in this state and the net premium written 226 applicable to the self-insurers in this state are the basis for 227 computing the amount to be assessed as a percentage of net 228 premiums. Such payments shall be made by each carrier and self-229 insurer to the department for the Special Disability Trust Fund 230 in accordance with such regulations as the department 231 prescribes.

4. The Chief Financial Officer is authorized to receive and credit to such Special Disability Trust Fund any sum or sums that may at any time be contributed to the state by the United States under any Act of Congress, or otherwise, to which the state may be or become entitled by reason of any payments made out of such fund.

238 Section 4. Subsection (8) of section 624.402, Florida 239 Statutes, is amended to read:

240 624.402 Exceptions, certificate of authority required.—A 241 certificate of authority shall not be required of an insurer 242 with respect to:

(8) (a) An insurer domiciled outside the United States
covering only persons who, at the time of issuance or renewal,
are nonresidents of the United States if:

246 <u>1. The insurer or any affiliated person as defined in s.</u> 247 <u>624.04 under common ownership or control with the insurer does</u> 248 <u>not solicit, sell, or accept application for any insurance</u> 249 <u>policy or contract to be delivered or issued for delivery to any</u> 250 <u>person in any state;</u> 251 2. The insurer registers with the office via a letter of

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252	notification upon commencing business from this state;
253	3. The insurer provides the following information, in
254	English, to the office annually by March 1:
255	a. The name of the insurer, the country of domicile, the
256	address of the insurer's principal office and office in this
257	state, the names of the owners of the insurer and their
258	percentage of ownership, the names of the officers and directors
259	of the insurer, the name, e-mail, and telephone number of a
260	contact person for the insurer, and the number of individuals
261	who are employed by the insurer or its affiliates in this state;
262	b. The lines of insurance and types of products offered by
263	the insurer;
264	c. A statement from the applicable regulatory body of the
265	insurer's domicile certifying that the insurer is licensed or
266	registered for those lines of insurance and types of products in
267	that domicile; and
268	d. A copy of the filings required by the applicable
269	regulatory body of the insurer's country of domicile in that
270	country's official language or in English, if available;
271	4. All certificates, policies, or contracts issued in this
272	state showing coverage under the insurer's policy include the
273	following statement in a contrasting color and at least 10-point
274	type: "The policy providing your coverage and the insurer
275	providing this policy have not been approved by the Florida
276	Office of Insurance Regulation"; and
277	5. In the event the insurer ceases to do business from
278	this state, the insurer will provide written notification to the
279	office within 30 days after cessation.
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FLORIDA HOUSE OF REPR	ESENTATIVES
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280	(b) For purposes of this subsection, "nonresident" means a
281	person who resides in and maintains a physical place of domicile
282	in a country other than the United States, which he or she
283	recognizes as and intends to maintain as his or her permanent
284	home. A nonresident does not include an unauthorized immigrant
285	present in the United States. Notwithstanding any other
286	provision of law, it is conclusively presumed, for purposes of
287	this subsection, that a person is a resident of the United
288	States if such person has:
289	1. Had his or her principal place of domicile in the
290	United States for 180 days or more in the 365 days prior to
291	issuance or renewal of the policy;
292	2. Registered to vote in any state;
293	3. Made a statement of domicile in any state; or
294	4. Filed for homestead tax exemption on property in any
295	state.
296	(c) Subject to the limitations provided in this
297	subsection, services, including those listed in s. 624.10, may
298	be provided by the insurer or an affiliated person as defined in
299	s. 624.04 under common ownership or control with the insurer.
300	(d) An alien insurer transacting insurance in this state
301	without complying with this subsection shall be in violation of
302	this chapter and subject to the penalties provided in s. 624.15.
303	(a) Life insurance policies or annuity contracts issued by
304	an insurer domiciled outside the United States covering only
305	persons who, at the time of issuance, are not residents of the
306	United States and are not nonresidents illegally residing in the
307	United States, provided:
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308	1. The insurer must currently be an authorized insurer in
309	its country of domicile as to the kind or kinds of insurance
310	proposed to be offered and must have been such an insurer for
311	not fewer than the immediately preceding 3 years, or must be the
312	wholly owned subsidiary of such authorized insurer or must be
313	the wholly owned subsidiary of an already eligible authorized
314	insurer as to the kind or kinds of insurance proposed for a
315	period of not fewer than the immediately preceding 3 years.
316	However, the office may waive the 3-year requirement if the
317	insurer has operated successfully for a period of at least the
318	immediately preceding year and has capital and surplus of not
319	less than \$25 million.
320	2. Before the office may grant eligibility, the requesting
321	insurer shall furnish the office with a duly authenticated copy
322	of its current annual financial statement, in English, and with
323	all monetary values therein expressed in United States dollars,
324	at an exchange rate then-current and shown in the statement, in
325	the case of statements originally made in the currencies of
326	other countries, and with such additional information relative
327	to the insurer as the office may request.
328	3. The insurer must have and maintain surplus as to
329	policyholders of not less than \$15 million. Any such surplus as
330	to policyholders shall be represented by investments consisting
331	of eligible investments for like funds of like domestic insurers
332	under part II of chapter 625; however, any such surplus as to
333	policyholders may be represented by investments permitted by the
334	domestic regulator of such alien insurance company if such
335	investments are substantially similar in terms of quality,
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	CS/HB 1087, Engrossed 1 2011
336	liquidity, and security to eligible investments for like funds
337	of like domestic insurers under part II of chapter 625.
338	4. The insurer must be of good reputation as to the
339	providing of service to its policyholders and the payment of
340	losses and claims.
341	5. To maintain eligibility, the insurer shall furnish the
342	office within the time period specified in s. 624.424(1)(a) a
343	duly authenticated copy of its current annual and quarterly
344	financial statements, in English, and with all monetary values
345	therein expressed in United States dollars, at an exchange rate
346	then-current and shown in the statement, in the case of
347	statements originally made in the currencies of other countries,
348	and with such additional information relative to the insurer as
349	the office may request.
350	6. An insurer receiving eligibility under this subsection
351	shall agree to make its books and records pertaining to its
352	operations in this state available for inspection during normal
353	business hours upon request of the office.
354	7. The insurer shall provide to the applicant for the
355	policy or contract a copy of the most recent quarterly financial
356	statements of the insurer providing, in clear and conspicuous
357	language:
358	a. The date of organization of the insurer.
359	b. The identity of and rating assigned by each recognized
360	insurance company rating organization that has rated the insurer
361	or, if applicable, that the insurer is unrated.
362	c. That the insurer does not hold a certificate of
363	authority issued in this state and that the office does not
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364	exercise regulatory oversight over the insurer.
365	d. The identity and address of the regulatory authority
366	exercising oversight of the insurer.
367	
368	This paragraph does not impose upon the office any duty or
369	responsibility to determine the actual financial condition or
370	claims practices of any unauthorized insurer, and the status of
371	eligibility, if granted by the office, indicates only that the
372	insurer appears to be financially sound and to have satisfactory
373	claims practices and that the office has no credible evidence to
374	the contrary.
375	(b) If at any time the office has reason to believe that
375	
	an insurer issuing policies or contracts pursuant to this
377	subsection is insolvent or is in unsound financial condition,
378	does not make reasonable prompt payment of benefits, or is no
379	longer eligible under the conditions specified in this
380	subsection, the office may conduct an examination or
381	investigation in accordance with s. 624.316, s. 624.3161, or s.
382	624.320 and, if the findings of such examination or
383	investigation warrant, may withdraw the eligibility of the
384	insurer to issue policies or contracts pursuant to this
385	subsection without having a certificate of authority issued by
386	the office.
387	(c) This subsection does not provide an exception to the
388	agent licensure requirements of chapter 626. Any insurer issuing
389	policies or contracts pursuant to this subsection shall appoint
390	the agents that the insurer uses to sell such policies or
391	contracts as provided in chapter 626.
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	CS/HB 1087, Engrossed 1 2011
392	(d) An insurer issuing policies or contracts pursuant to
393	this subsection is subject to part IX of chapter 626, Unfair
394	Insurance Trade Practices, and the office may take such actions
395	against the insurer for a violation as are provided in that
396	part.
397	(e) Policies and contracts issued pursuant to this
398	subsection are not subject to the premium tax specified in s.
399	624.509.
400	(f) Applications for life insurance coverage offered under
401	this subsection must contain, in contrasting color and not less
402	than 12-point type, the following statement on the same page as
403	the applicant's signature:
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405	This policy is primarily governed by the laws of a
406	foreign country. As a result, all of the rating and
407	underwriting laws applicable to policies filed in this
408	state do not apply to this coverage, which may result
409	in your premiums being higher than would be
410	permissible under a Florida-approved policy. Any
411	purchase of individual life insurance should be
412	considered carefully, as future medical conditions may
413	make it impossible to qualify for another individual
414	life policy. If the insurer issuing your policy
415	becomes insolvent, this policy is not covered by the
416	Florida Life and Health Insurance Guaranty
417	Association. For information concerning individual
418	life coverage under a Florida-approved policy, consult
419	your agent or the Florida Department of Financial
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CS/HB 1087, Engrossed 1 Services. (g) All life insurance policies and annuity contracts issued pursuant to this subsection must contain on the first page of the policy or contract, in contrasting color and not less than 10-point type, the following statement: The benefits of the policy providing your coverage are governed primarily by the law of a country other than the United States. (h) All single-premium life insurance policies and singlepremium annuity contracts issued to persons who are not

433 residents of the United States and are not nonresidents 434 illegally residing in the United States pursuant to this 435 subsection shall be subject to the provisions of chapter 896. 436 Section 5. Paragraph (d) of subsection (8) of section

437 624.424, Florida Statutes, is amended to read:

624.424 Annual statement and other information.-

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440 An insurer may not use the same accountant or partner (d) 441 of an accounting firm responsible for preparing the report 442 required by this subsection for more than 5 7 consecutive years. Following this period, the insurer may not use such accountant 443 or partner for a period of 5 $\frac{2}{2}$ years, but may use another 444 445 accountant or partner of the same firm. An insurer may request the office to waive this prohibition based upon an unusual 446 447 hardship to the insurer and a determination that the accountant

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is exercising independent judgment that is not unduly influenced by the insurer considering such factors as the number of partners, expertise of the partners or the number of insurance clients of the accounting firm; the premium volume of the insurer; and the number of jurisdictions in which the insurer transacts business.

454 Section 6. Effective upon this act becoming a law, section 455 626.207, Florida Statutes, is amended to read:

456 626.207 <u>Disqualification of applicants and licensees;</u>
 457 <u>penalties against licensees; rulemaking authority</u> Department
 458 rulemaking authority; waiting periods for applicants; penalties
 459 against licensees.-

460 For purposes of this section, the term "financial (1)461 services business" means any financial activity regulated by the 462 Department of Financial Services, the Office of Insurance 463 Regulation, or the Office of Financial Regulation. The 464 department shall adopt rules establishing specific waiting 465 periods for applicants to become eligible for licensure 466 following denial, suspension, or revocation pursuant to s. 467 626.611, s. 626.621, s. 626.8437, s. 626.844, s. 626.935, s. 468 634.181, s. 634.191, s. 634.320, s. 634.321, s. 634.422, 469 634.423, s. 642.041, or s. 642.043. The purpose of the waiting 470 periods is to provide sufficient time to demonstrate reformation 471 of character and rehabilitation. The waiting periods shall vary 472 based on the type of conduct and the length of time since the conduct occurred and shall also be based on the probability that 473 the propensity to commit illegal conduct has been overcome. The 474 475 waiting periods may be adjusted based on aggravating and Page 17 of 37

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476 mitigating factors established by rule and consistent with this 477 purpose. 478 (2) For purposes of this section, the terms "felony of the 479 first degree" and "capital felony" include all felonies 480 designated as such by the Florida Statutes, as well as any felony so designated in the jurisdiction in which the plea is 481 482 entered or judgment is rendered. 483 (3) An applicant who commits a felony of the first degree, 484 a capital felony, a felony involving money laundering, fraud, or 485 embezzlement, or a felony directly related to the financial 486 services business is permanently barred from applying for a 487 license under this part. This bar applies to convictions, guilty 488 pleas, or nolo contendere pleas, regardless of adjudication, by 489 any applicant, officer, director, majority owner, partner, 490 manager, or other person who manages or controls any applicant. 491 (4) For all other crimes not included in subsection (3), 492 the department shall adopt rules establishing the process and 493 application of disgualifying periods that include: 494 (a) A 15-year disqualifying period for all felonies 495 involving moral turpitude that are not specifically included in 496 the permanent bar contained in subsection (3). 497 (b) A 7-year disqualifying period for all felonies to 498 which neither the permanent bar in subsection (3) nor the 15year disqualifying period in paragraph (a) applies. 499 500 (c) A 7-year disqualifying period for all misdemeanors 501 directly related to the financial services business. 502 (5) The department shall adopt rules providing for 503 additional disqualifying periods due to the commitment of Page 18 of 37

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504 <u>multiple crimes and other factors reasonably related to the</u> 505 <u>applicant's criminal history. The rules shall provide for</u> 506 <u>mitigating and aggravating factors. However, mitigation may not</u> 507 <u>result in a period of disqualification of less than 7 years and</u> 508 <u>may not mitigate the disqualifying periods in paragraphs (4)(b)</u> 509 and (c).

For purposes of this section, the disqualifying 510 (6) 511 periods begin upon the applicant's final release from 512 supervision or upon completion of the applicant's criminal sentence, including payment of fines, restitution, and court 513 514 costs for the crime for which the disqualifying period applies. 515 (7) After the disqualifying period has been met, the 516 burden is on the applicant to demonstrate that the applicant has 517 been rehabilitated, does not pose a risk to the insurance-buying 518 public, is fit and trustworthy to engage in the business of 519 insurance pursuant to s. 626.611(7), and is otherwise qualified 520 for licensure.

521 (8) (2) The department shall adopt rules establishing 522 specific penalties against licensees in accordance with ss. 523 626.641 and 626.651 for violations of s. 626.611, s. 626.621, s. 524 626.8437, s. 626.844, s. 626.935, s. 634.181, s. 634.191, s. 634.320, s. 634.321, s. 634.422, s. 634.423, s. 642.041, or s. 525 526 642.043. The purpose of the revocation or suspension is to provide a sufficient penalty to deter future violations of the 527 528 Florida Insurance Code. The imposition of a revocation or the 529 length of suspension shall be based on the type of conduct and the probability that the propensity to commit further illegal 530 531 conduct has been overcome at the time of eligibility for

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relicensure. The revocation or the length of suspension may be
adjusted based on aggravating or mitigating factors, established
by rule and consistent with this purpose.

535 (9) Section 112.011 does not apply to any applicants for 536 licensure under the Florida Insurance Code, including, but not 537 limited to, agents, agencies, adjusters, adjusting firms, 538 customer representatives, or managing general agents.

539 Section 7. Subsection (3) of section 626.7451, Florida 540 Statutes, is amended to read:

541 626.7451 Managing general agents; required contract 542 provisions.—No person acting in the capacity of a managing 543 general agent shall place business with an insurer unless there 544 is in force a written contract between the parties which sets 545 forth the responsibility for a particular function, specifies 546 the division of responsibilities, and contains the following 547 minimum provisions:

548 All funds collected for the account of the insurer (3)549 shall be held by the managing general agent in a fiduciary 550 capacity in a bank which is insured by the Federal Deposit 551 Insurance Corporation a member of the Federal Reserve System. 552 The This account shall be used for all payment as directed by 553 the insurer. The managing general agent may retain up to no more 554 than 60 days of estimated claims payments and allocated loss 555 adjustment expenses.

556

557 For the purposes of this section and ss. 626.7453 and 626.7454, 558 the term "controlling person" or "controlling" has the meaning 559 set forth in s. 625.012(5)(b)1., and the term "controlled

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560	person" or "controlled" has the meaning set forth in s.
561	625.012(5)(b)2.
562	Section 8. Subsection (4) of section 626.8651, Florida
563	Statutes, is amended to read:
564	626.8651 Public adjuster apprentice license;
565	qualifications
566	(4) An applicant must have received designation as an
567	Accredited Claims Adjuster (ACA), as a Certified Adjuster (CA),
568	or as a Certified Claims Adjuster (CCA) after completion of
569	training that qualifies the applicant to engage in the business
570	of a public adjuster apprentice fairly and without injury to the
571	public. Such training and instruction must address adjusting
572	damages and losses under insurance contracts, the terms and
573	effects of insurance contracts, and knowledge of the laws of
574	this state relating to insurance contracts.
575	Section 9. Paragraphs (a) and (b) of subsection (1),
576	paragraphs (a) and (b) of subsection (2), and subsection (4) of
577	section 627.4133, Florida Statutes, are amended to read:
578	627.4133 Notice of cancellation, nonrenewal, or renewal
579	premium
580	(1) Except as provided in subsection (2):
581	(a) An insurer issuing a policy providing coverage for
582	workers' compensation and employer's liability insurance,
583	property, casualty, except mortgage guaranty, surety, or marine
584	insurance, other than motor vehicle insurance subject to s.
585	627.728, shall give the <u>first-named</u> named insured at least 45
586	days' advance written notice of nonrenewal or of the renewal
587	premium. If the policy is not to be renewed, the written notice
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588 shall state the reason or reasons as to why the policy is not to 589 be renewed. This requirement applies only if the insured has 590 furnished all of the necessary information so as to enable the 591 insurer to develop the renewal premium prior to the expiration 592 date of the policy to be renewed.

593 An insurer issuing a policy providing coverage for (b) 594 property, casualty, except mortgage guaranty, surety, or marine 595 insurance, other than motor vehicle insurance subject to s. 596 627.728 or s. 627.7281, shall give the first-named named insured written notice of cancellation or termination other than 597 nonrenewal at least 45 days prior to the effective date of the 598 599 cancellation or termination, including in the written notice the 600 reason or reasons for the cancellation or termination, except 601 that:

602 When cancellation is for nonpayment of premium, at 1. 603 least 10 days' written notice of cancellation accompanied by the 604 reason therefor shall be given. As used in this subparagraph and 605 s. 440.42(3), the term "nonpayment of premium" means failure of 606 the named insured to discharge when due any of her or his 607 obligations in connection with the payment of premiums on a 608 policy or any installment of such premium, whether the premium 609 is payable directly to the insurer or its agent or indirectly 610 under any premium finance plan or extension of credit, or 611 failure to maintain membership in an organization if such 612 membership is a condition precedent to insurance coverage. "Nonpayment of premium" also means the failure of a financial 613 614 institution to honor an insurance applicant's check after delivery to a licensed agent for payment of a premium, even if 615

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616 the agent has previously delivered or transferred the premium to 617 the insurer. If a dishonored check represents the initial 618 premium payment, the contract and all contractual obligations 619 shall be void ab initio unless the nonpayment is cured within 620 the earlier of 5 days after actual notice by certified mail is 621 received by the applicant or 15 days after notice is sent to the 622 applicant by certified mail or registered mail, and if the 623 contract is void, any premium received by the insurer from a 624 third party shall be refunded to that party in full; and

625 2. When such cancellation or termination occurs during the 626 first 90 days during which the insurance is in force and the 627 insurance is canceled or terminated for reasons other than nonpayment of premium, at least 20 days' written notice of 628 629 cancellation or termination accompanied by the reason therefor 630 shall be given except where there has been a material 631 misstatement or misrepresentation or failure to comply with the 632 underwriting requirements established by the insurer.

634 After the policy has been in effect for 90 days, no such policy 635 shall be canceled by the insurer except when there has been a 636 material misstatement, a nonpayment of premium, a failure to 637 comply with underwriting requirements established by the insurer 638 within 90 days of the date of effectuation of coverage, or a substantial change in the risk covered by the policy or when the 639 cancellation is for all insureds under such policies for a given 640 641 class of insureds. This subsection does not apply to individually rated risks having a policy term of less than 90 642 643 days.

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

(a) The insurer shall give the <u>first-named</u> named insured
at least 45 days' advance written notice of the renewal premium.

652 (b) The insurer shall give the first-named named insured written notice of nonrenewal, cancellation, or termination at 653 654 least 100 days prior to the effective date of the nonrenewal, 655 cancellation, or termination. However, the insurer shall give at 656 least 100 days' written notice, or written notice by June 1, 657 whichever is earlier, for any nonrenewal, cancellation, or termination that would be effective between June 1 and November 658 659 30. The notice must include the reason or reasons for the 660 nonrenewal, cancellation, or termination, except that:

1. The insurer shall give the <u>first-named</u> named insured written notice of nonrenewal, cancellation, or termination at least 180 days prior to the effective date of the nonrenewal, cancellation, or termination for a <u>first-named</u> named insured whose residential structure has been insured by that insurer or an affiliated insurer for at least a 5-year period immediately prior to the date of the written notice.

668 2. When cancellation is for nonpayment of premium, at 669 least 10 days' written notice of cancellation accompanied by the 670 reason therefor shall be given. As used in this subparagraph, 671 the term "nonpayment of premium" means failure of the named

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672 insured to discharge when due any of her or his obligations in 673 connection with the payment of premiums on a policy or any 674 installment of such premium, whether the premium is payable 675 directly to the insurer or its agent or indirectly under any 676 premium finance plan or extension of credit, or failure to 677 maintain membership in an organization if such membership is a 678 condition precedent to insurance coverage. "Nonpayment of 679 premium" also means the failure of a financial institution to 680 honor an insurance applicant's check after delivery to a 681 licensed agent for payment of a premium, even if the agent has 682 previously delivered or transferred the premium to the insurer. 683 If a dishonored check represents the initial premium payment, 684 the contract and all contractual obligations shall be void ab 685 initio unless the nonpayment is cured within the earlier of 5 686 days after actual notice by certified mail is received by the 687 applicant or 15 days after notice is sent to the applicant by 688 certified mail or registered mail, and if the contract is void, 689 any premium received by the insurer from a third party shall be 690 refunded to that party in full.

691 When such cancellation or termination occurs during the 3. 692 first 90 days during which the insurance is in force and the insurance is canceled or terminated for reasons other than 693 694 nonpayment of premium, at least 20 days' written notice of 695 cancellation or termination accompanied by the reason therefor 696 shall be given except where there has been a material 697 misstatement or misrepresentation or failure to comply with the 698 underwriting requirements established by the insurer. 699 The requirement for providing written notice of 4.

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nonrenewal by June 1 of any nonrenewal that would be effective between June 1 and November 30 does not apply to the following situations, but the insurer remains subject to the requirement to provide such notice at least 100 days prior to the effective date of nonrenewal:

A policy that is nonrenewed due to a revision in the
coverage for sinkhole losses and catastrophic ground cover
collapse pursuant to s. 627.706, as amended by s. 30, chapter
2007-1, Laws of Florida.

b. A policy that is nonrenewed by Citizens Property
Insurance Corporation, pursuant to s. 627.351(6), for a policy
that has been assumed by an authorized insurer offering
replacement or renewal coverage to the policyholder.

After the policy has been in effect for 90 days, the policy 714 715 shall not be canceled by the insurer except when there has been 716 a material misstatement, a nonpayment of premium, a failure to 717 comply with underwriting requirements established by the insurer 718 within 90 days of the date of effectuation of coverage, or a 719 substantial change in the risk covered by the policy or when the 720 cancellation is for all insureds under such policies for a given 721 class of insureds. This paragraph does not apply to individually 722 rated risks having a policy term of less than 90 days.

(4) Notwithstanding the provisions of s. 440.42(3), if cancellation of a policy providing coverage for workers' compensation and employer's liability insurance is requested <u>in</u> <u>writing</u> by the insured, such cancellation shall be effective on the date requested by the insured or, if no date is specified by

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728 the insured, cancellation shall be effective on the date of the 729 written request. The carrier is not required to send notice of 730 cancellation to the insured if the cancellation is requested in 731 writing by the insured the carrier sends the notice of 732 cancellation to the insured. Any retroactive assumption of 733 coverage and liabilities under a policy providing workers' 734 compensation and employer's liability insurance may not exceed 21 days. 735 Section 10. Subsection (3) is added to section 627.4137, 736 737 Florida Statutes, to read: 627.4137 Disclosure of certain information required.-738 739 (3) Any request made to a self-insured corporation 740 pursuant to this section shall be sent by certified mail to the 741 registered agent of the disclosing entity. Section 11. Subsection (2) of section 627.7277, Florida 742 743 Statutes, is amended to read: 744 627.7277 Notice of renewal premium.-745 (2) An insurer shall mail or deliver to the first-named 746 insured its policyholder at least 30 days' advance written 747 notice of the renewal premium for the policy. 748 Section 12. Paragraph (a) of subsection (3), paragraphs 749 (a) and (d) of subsection (4), and subsections (5) and (6) of 750 section 627.728, Florida Statutes, are amended to read: 751 627.728 Cancellations; nonrenewals.-752 (3) (a) No notice of cancellation of a policy to which this section applies shall be effective unless mailed or delivered by 753 754 the insurer to the first-named named insured and to the first-755 named named insured's insurance agent at least 45 days prior to Page 27 of 37

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the effective date of cancellation, except that, when cancellation is for nonpayment of premium, at least 10 days' notice of cancellation accompanied by the reason therefor shall be given. No notice of cancellation of a policy to which this section applies shall be effective unless the reason or reasons for cancellation accompany the notice of cancellation.

(4) (a) No insurer shall fail to renew a policy unless it mails or delivers to the <u>first-named</u> named insured, at the address shown in the policy, and to the <u>first-named</u> named insured's insurance agent at her or his business address, at least 45 days' advance notice of its intention not to renew; and the reasons for refusal to renew must accompany such notice. This subsection does not apply:

769 1. If the insurer has manifested its willingness to renew; 770 or

771 772 2. In case of nonpayment of premium.

Notwithstanding the failure of an insurer to comply with this subsection, the policy shall terminate on the effective date of any other automobile liability insurance policy procured by the insured with respect to any automobile designated in both policies. Unless a written explanation for refusal to renew accompanies the notice of intention not to renew, the policy shall remain in full force and effect.

(d) Instead of canceling or nonrenewing a policy, an
insurer may, upon expiration of the policy term, transfer a
policy to another insurer under the same ownership or management
as the transferring insurer, by giving the <u>first-named</u> named

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insured at least 45 days' advance notice of its intent to transfer the policy and of the premium and the specific reasons for any increase in the premium.

(5) United States postal proof of mailing or certified or registered mailing of notice of cancellation, of intention not to renew, or of reasons for cancellation, or of the intention of the insurer to issue a policy by an insurer under the same ownership or management, to the <u>first-named named</u> insured at the address shown in the policy shall be sufficient proof of notice.

793 When a policy is canceled, other than for nonpayment (6) 794 of premium, or in the event of failure to renew a policy to 795 which subsection (4) applies, the insurer shall notify the 796 first-named named insured of her or his possible eligibility for 797 insurance through the Automobile Joint Underwriting Association. 798 Such notice shall accompany or be included in the notice of cancellation or the notice of intent not to renew and shall 799 800 state that such notice of availability of the Automobile Joint 801 Underwriting Association is given pursuant to this section.

802 Section 13. Section 627.7281, Florida Statutes, is amended 803 to read:

804 627.7281 Cancellation notice.-An insurer issuing a policy 805 of motor vehicle insurance not covered under the cancellation 806 provisions of s. 627.728 shall give the first-named named insured notice of cancellation at least 45 days prior to the 807 effective date of cancellation, except that, when cancellation 808 is for nonpayment of premium, at least 10 days' notice of 809 810 cancellation accompanied by the reason therefor shall be given. As used in this section, "policy" does not include a binder as 811

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812 defined in s. 627.420 unless the duration of the binder period 813 exceeds 60 days.

814 Section 14. Section 634.403, Florida Statutes, is amended 815 to read:

816

634.403 License required; exemptions.-

(1) No person in this state shall provide or offer to
provide service warranties to residents of this state unless
authorized therefor under a subsisting license issued by the
office. The service warranty association shall pay to the office
a license fee of \$200 for such license for each license year, or
part thereof, the license is in force.

(2) An insurer, while authorized to transact property or
casualty insurance in this state, may also transact a service
warranty business without additional qualifications or
authority, but shall be otherwise subject to the applicable
provisions of this part.

(3) The office may, pursuant to s. 120.569, in its
discretion and without advance notice and hearing, issue an
immediate final order to cease and desist to any person or
entity which violates this section. The Legislature finds that a
violation of this section constitutes an imminent and immediate
threat to the public health, safety, and welfare of the
residents of this state.

(4) Any person that is an affiliate of a domestic insurer
as defined in chapter 624 is exempt from application of this
part if the person does not issue, or market or cause to be
marketed, service warranties to residents of this state and does
not administer service warranties that were originally issued to

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840 residents of this state. The domestic insurer or its wholly 841 owned Florida licensed insurer must be the direct obligor of all 842 service warranties issued by such affiliate or must issue a 843 contractual liability insurance policy to such affiliate that 844 meets the conditions described in s. 634.406(3). If the Office 845 of Insurance Regulation determines, after notice and opportunity 846 for a hearing, that a person's intentional business practices do 847 not comply with any of the exemption requirements of this 848 subsection, the person shall be subject to this part.

849(5) A person is exempt from the license requirement in850this section if the person complies with the following:

(a) The service warranties are only sold to nonresidents
 of this state and the person does not issue, market, or cause to
 be marketed service warranties to residents of this state.

(b) The person submits a letter of notification that
 provides the following information to the office upon the start
 of business from this state and annually thereafter by March 1:

857 <u>1. The type of products offered and a statement certifying</u>
858 <u>that the products are not regulated in the state in which the</u>
859 <u>person is transacting business or that the person is licensed in</u>
860 <u>the state in which the person is transacting business.</u>

2. The name of the person, the state of domicile, the home address and address in this state of the person, the names of the owners and their percentage of ownership, the names of the officers and directors, the name, e-mail, and telephone number of a contact person, the states in which the person is transacting business, and how many individuals are employed in

867 this state.

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868	(c) If the person ceases to do business from this state,
869	the person shall provide written notification to the office
870	within 30 days after cessation of business.
871	(6) (5) Any person who provides, offers to provide, or
872	holds oneself out as providing or offering to provide a service
873	warranty <u>to residents of</u> in this state or from this state
874	without holding a subsisting license commits, in addition to any
875	other violation, a misdemeanor of the first degree, punishable
876	as provided in s. 775.082 or s. 775.083.
877	Section 15. Section 627.442, Florida Statutes, is amended
878	to read:
879	627.442 Insurance contracts
880	(1) A person who requires a workers' compensation
881	insurance policy pursuant to a construction contract may not
882	reject a workers' compensation insurance policy issued by a
883	self-insurance fund that is subject to part V of chapter 631
884	based upon the self-insurance fund not being rated by a
885	nationally recognized insurance rating service.
886	(2) Notwithstanding s. 440.381(3), premium audits are not
887	required for workers' compensation coverage, other than an audit
888	required by the insurance policy or an order of the office, or
889	at least once each policy period, if requested by the insured.
890	Section 16. Subsections (4) and (7) of section 627.7295,
891	Florida Statutes, are amended to read:
892	627.7295 Motor vehicle insurance contracts
893	(4) If subsection (7) does not apply, the insurer may
894	cancel the policy in accordance with this code except that,
895	notwithstanding s. 627.728, an insurer may not cancel a new
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896 policy or binder during the first 60 days immediately following 897 the effective date of the policy or binder <u>except</u> for nonpayment 898 of premium unless the reason for the cancellation is the 899 issuance of a check for the premium that is dishonored for any 900 reason.

901 (7)A policy of private passenger motor vehicle insurance 902 or a binder for such a policy may be initially issued in this 903 state only if, before the effective date of such binder or 904 policy, the insurer or agent has collected from the insured an 905 amount equal to 2 months' premium. An insurer, agent, or premium 906 finance company may not, directly or indirectly, take any action 907 resulting in the insured having paid from the insured's own funds an amount less than the 2 months' premium required by this 908 909 subsection. This subsection applies without regard to whether the premium is financed by a premium finance company or is paid 910 911 pursuant to a periodic payment plan of an insurer or an 912 insurance agent. This subsection does not apply if an insured or 913 member of the insured's family is renewing or replacing a policy 914 or a binder for such policy written by the same insurer or a 915 member of the same insurer group. This subsection does not apply 916 to an insurer that issues private passenger motor vehicle 917 coverage primarily to active duty or former military personnel 918 or their dependents. This subsection does not apply if all 919 policy payments are paid pursuant to a payroll deduction plan or 920 an automatic electronic funds transfer payment plan from the policyholder, provided that the first policy payment is made by 921 922 cash, cashier's check, check, or a money order. This subsection 923 and subsection (4) do not apply if all policy payments to an Page 33 of 37

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924 insurer are paid pursuant to an automatic electronic funds 925 transfer payment plan from an agent, a managing general agent, 926 or a premium finance company and if the policy includes, at a minimum, personal injury protection pursuant to ss. 627.730-927 928 627.7405; motor vehicle property damage liability pursuant to s. 929 627.7275; and bodily injury liability in at least the amount of 930 \$10,000 because of bodily injury to, or death of, one person in 931 any one accident and in the amount of \$20,000 because of bodily 932 injury to, or death of, two or more persons in any one accident. This subsection and subsection (4) do not apply if an insured 933 has had a policy in effect for at least 6 months, the insured's 934 935 agent is terminated by the insurer that issued the policy, and 936 the insured obtains coverage on the policy's renewal date with a 937 new company through the terminated agent. Section 17. Subsection (3) of section 626.916, Florida 938 939 Statutes, is amended to read: 940 626.916 Eligibility for export.-941 (3) (a) Subsection (1) does not apply to wet marine and 942 transportation or aviation risks which are subject to s. 943 626.917. 944 Paragraphs (1)(a)-(d) do not apply to classes of (b) 945 insurance which are subject to s. 627.062(3)(d)1. These classes 946 may be exportable under the following conditions: 947 1. The insurance must be placed only by or through a 948 surplus lines agent licensed in this state; 949 2. The insurer must be made eligible under s. 626.918; and 950 3. The insured must sign a disclosure that substantially

951 provides the following: "You are agreeing to place coverage in



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952	the surplus lines market. Superior coverage may be available in
953	the admitted market and at a lesser cost. Persons insured by
954	surplus lines carriers are not protected under the Florida
955	Insurance Guaranty Act with respect to any right of recovery for
956	the obligation of an insolvent unlicensed insurer." If the
957	notice is signed by the insured, the insured is presumed to have
958	been informed and to know that other coverage may be available,
959	and, with respect to the diligent-effort requirement under
960	subsection (1), there is no liability on the part of, and no
961	cause of action arises against, the retail agent presenting the
962	form.
963	Section 18. The amendments to s. 626.207, Florida
964	Statutes, made by this act do not apply retroactively and apply
965	only to applicants whose applications are pending or submitted
966	on or after the date that the amendments to s. 626.207, Florida
967	Statutes, made by this act become law. This section shall take
968	effect upon this act becoming a law.
969	Section 19. Paragraph (c) of subsection (7) of section
970	817.234, Florida Statutes, is amended, present subsection (12)
971	of that section is renumbered as subsection (13), and a new
972	subsection (12) is added to that section, to read:
973	817.234 False and fraudulent insurance claims
974	(7)
975	(c) An insurer, or any person acting at the direction of
976	or on behalf of an insurer, may not change an opinion in a
977	mental or physical report prepared under s. 627.736 <u>(8)(7) or</u>
978	direct the physician preparing the report to change such
979	opinion; however, this provision does not preclude the insurer
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980	from calling to the attention of the physician errors of fact in
981	the report based upon information in the claim file. Any person
982	who violates this paragraph commits a felony of the third
983	degree, punishable as provided in s. 775.082, s. 775.083, or s.
984	775.084.
985	(12) In addition to any criminal liability, a person
986	convicted of violating any provision of this section for the
987	purpose of receiving insurance proceeds from a motor vehicle
988	insurance contract is subject to a civil penalty.
989	(a) Except for a violation of subsection (9), the civil
990	penalty shall be:
991	1. A fine up to \$5,000 for a first offense.
992	2. A fine greater than \$5,000, but not to exceed \$10,000,
993	for a second offense.
994	3. A fine greater than \$10,000, but not to exceed \$15,000,
995	for a third or subsequent offense.
996	(b) The civil penalty for a violation of subsection (9)
997	must be at least \$15,000 but may not exceed \$50,000.
998	(c) The civil penalty shall be paid to the Insurance
999	Regulatory Trust Fund within the Department of Financial
1000	Services and used by the department for the investigation and
1001	prosecution of insurance fraud.
1002	(d) This subsection does not prohibit a state attorney
1003	from entering into a written agreement in which the person
1004	charged with the violation does not admit to or deny the charges
1005	but consents to payment of the civil penalty.
1006	Section 20. Except as otherwise expressly provided in this
1007	act and except for this section, which shall take effect upon
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1008 this act becoming a law, this act shall take effect July 1, 1009 2011.