A bill to be entitled 1 2 An act relating to automobile insurance; amending s. 3 627.311, F.S.; authorizing the Florida Automobile 4 Joint Underwriting Association and a joint 5 underwriting plan approved by the Office of Insurance 6 Regulation to cancel personal lines or commercial 7 policies within a specified time for nonpayment of 8 premium due to certain reasons; prohibiting an insured from cancelling a policy or binder within a specified 9 10 time except under certain conditions; amending s. 11 627.4035, F.S.; revising the forms of premium payment; 12 authorizing insurers to charge an insufficient funds fee of up to a specified amount; amending s. 627.7283, 13 14 F.S.; authorizing an insured who cancels a policy to 15 apply the unearned portion of any premium paid to unpaid balances of other policies with the same 16 insurer or insurer group; amending s. 627.7295, F.S.; 17 updating applicability language to include a reference 18 19 to recurring credit card or debit card payments; 20 amending s. 627.736, F.S.; requiring that a certain 21 standard form be approved by the office and adopted by 2.2 the Financial Services Commission, rather than approved by the office or adopted by the commission; 23 revising standards for compliance for specified 24 25 billings for medical services; amending s. 627.739, 26 F.S.; revising applicability; providing a limitation

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to an amount of expenses and losses applicable to a deductible related to personal injury protection benefits under a certain condition; amending s. 627.744, F.S.; authorizing an insurer to opt out of the preinsurance inspection of private passenger motor vehicles and to establish its own preinsurance inspection program if it files a certain manual rule with the office; providing an effective date.

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

Section 1. Paragraph (m) is added to subsection (3) of section 627.311, Florida Statutes, to read:

627.311 Joint underwriters and joint reinsurers; public records and public meetings exemptions.—

(3) The office may, after consultation with insurers licensed to write automobile insurance in this state, approve a joint underwriting plan for purposes of equitable apportionment or sharing among insurers of automobile liability insurance and other motor vehicle insurance, as an alternate to the plan required in s. 627.351(1). All insurers authorized to write automobile insurance in this state shall subscribe to the plan and participate therein. The plan shall be subject to continuous review by the office which may at any time disapprove the entire plan or any part thereof if it determines that conditions have changed since prior approval and that in view of the purposes of

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the plan changes are warranted. Any disapproval by the office shall be subject to the provisions of chapter 120. The Florida Automobile Joint Underwriting Association is created under the plan. The plan and the association:

- (m) May cancel personal lines or commercial policies issued by the plan within the first 60 days after the effective date of the policy or binder for nonpayment of premium if the check issued for payment of the premium is dishonored for any reason or if any other form of payment is rejected or deemed invalid. An insured may not cancel a policy or binder within the first 90 days after its effective date, or within a lesser period as required by the plan, except:
  - 1. Upon total destruction of the insured motor vehicle;
- 2. Upon transfer of ownership of the insured motor vehicle; or
- 3. After purchase of another policy or binder covering the motor vehicle that was covered under the policy being canceled.
- Section 2. Subsection (1) of section 627.4035, Florida Statutes, is amended to read:
  - 627.4035 Cash Payment of premiums; claims.-
- (1) (a) The premiums for insurance contracts issued in this state or covering risk located in this state shall be paid in cash consisting of coins, currency, checks, drafts, or money orders or by using a debit card, credit card, automatic electronic funds transfer, or payroll deduction plan. By July 1, 2007, Insurers issuing personal lines residential and commercial

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property policies shall provide a premium payment plan option to their policyholders which allows for a minimum of quarterly and semiannual payment of premiums. Insurers may, but are not required to, offer monthly payment plans. Insurers issuing such policies must submit their premium payment plan option to the office for approval before use.

- (b) If a payment of premium under this subsection by debit card, credit card, automatic electronic funds transfer, check, or draft is returned, is declined, or cannot be processed due to insufficient funds, the insurer may impose an insufficient funds fee of up to \$15 per occurrence pursuant to the policy terms.
- Section 3. Subsections (1), (2), and (3) of section 627.7283, Florida Statutes, are amended to read:
  - 627.7283 Cancellation; return of unearned premium.-
- (1) If the insured cancels a policy of motor vehicle insurance, the insurer must mail or electronically transfer the unearned portion of any premium paid within 30 days after the effective date of the policy cancellation or receipt of notice or request for cancellation, whichever is later. This requirement applies to a cancellation initiated by an insured for any reason. However, the insured may elect to apply the unearned portion of any premium paid to unpaid balances of other policies with the same insurer or insurer group.
- (2) If an insurer cancels a policy of motor vehicle insurance, the insurer must mail or electronically transfer the unearned premium portion of any premium within 15 days after the

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may elect to apply the unearned portion of any premium paid to unpaid balances of other policies with the same insurer or insurer group.

- electronically transferred, or applied to the unpaid balance of other policies within the applicable period, the insurer must pay to the insured 8 percent interest on the amount due. If the unearned premium is not mailed or electronically transferred within 45 days after the applicable period, the insured may bring an action against the insurer pursuant to s. 624.155.
- Section 4. Subsection (7) of section 627.7295, Florida Statutes, is amended to read:
  - 627.7295 Motor vehicle insurance contracts.-
- or a binder for such a policy may be initially issued in this state only if, before the effective date of such binder or policy, the insurer or agent has collected from the insured an amount equal to 2 months' premium. An insurer, agent, or premium finance company may not, directly or indirectly, take any action resulting in the insured having paid from the insured's own funds an amount less than the 2 months' premium required by this subsection. This subsection applies without regard to whether the premium is financed by a premium finance company or is paid pursuant to a periodic payment plan of an insurer or an insurance agent. This subsection does not apply if an insured or

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member of the insured's family is renewing or replacing a policy or a binder for such policy written by the same insurer or a member of the same insurer group. This subsection does not apply to an insurer that issues private passenger motor vehicle coverage primarily to active duty or former military personnel or their dependents. This subsection does not apply if all policy payments are paid pursuant to a payroll deduction plan, or an automatic electronic funds transfer payment plan from the policyholder, or a recurring credit card or debit card agreement with the insurer. This subsection and subsection (4) do not apply if all policy payments to an insurer are paid pursuant to an automatic electronic funds transfer payment plan from an agent, a managing general agent, or a premium finance company and if the policy includes, at a minimum, personal injury protection pursuant to ss. 627.730-627.7405; motor vehicle property damage liability pursuant to s. 627.7275; and bodily injury liability in at least the amount of \$10,000 because of bodily injury to, or death of, one person in any one accident and in the amount of \$20,000 because of bodily injury to, or death of, two or more persons in any one accident. This subsection and subsection (4) do not apply if an insured has had a policy in effect for at least 6 months, the insured's agent is terminated by the insurer that issued the policy, and the insured obtains coverage on the policy's renewal date with a new company through the terminated agent.

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Section 5. Paragraph (d) of subsection (5) of section

157 627.736, Florida Statutes, is amended to read:

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627.736 Required personal injury protection benefits; exclusions; priority; claims.—

- (5) CHARGES FOR TREATMENT OF INJURED PERSONS.-
- (d) All statements and bills for medical services rendered by a physician, hospital, clinic, or other person or institution shall be submitted to the insurer on a properly completed Centers for Medicare and Medicaid Services (CMS) 1500 form, UB 92 forms, or any other standard form approved by the office and or adopted by the commission for purposes of this paragraph. All billings for such services rendered by providers must, to the extent applicable, comply with the CMS 1500 form instructions, the American Medical Association CPT Editorial Panel, and the Healthcare Common Procedure Coding System (HCPCS); and must follow the Physicians' Current Procedural Terminology (CPT), the HCPCS in effect for the year in which services are rendered, or the ICD-9-CM for services rendered before October 1, 2015, or the ICD-10-CM for services rendered on or after October 1, 2015 follow the Physicians' Current Procedural Terminology (CPT) or Healthcare Correct Procedural Coding System (HCPCS), or ICD-9 in effect for the year in which services are rendered and comply with the CMS 1500 form instructions, the American Medical Association CPT Editorial Panel, and the HCPCS. All providers, other than hospitals, must include on the applicable claim form the professional license number of the provider in the line or space provided for "Signature of Physician or Supplier,

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Including Degrees or Credentials." In determining compliance with applicable CPT and HCPCS coding, guidance shall be provided by the Physicians' Current Procedural Terminology (CPT) or the Healthcare Correct Procedural Coding System (HCPCS) in effect for the year in which services were rendered, the Office of the Inspector General, Physicians Compliance Guidelines, and other authoritative treatises designated by rule by the Agency for Health Care Administration. A statement of medical services may not include charges for medical services of a person or entity that performed such services without possessing the valid licenses required to perform such services. For purposes of paragraph (4)(b), an insurer is not considered to have been furnished with notice of the amount of covered loss or medical bills due unless the statements or bills comply with this paragraph and are properly completed in their entirety as to all material provisions, with all relevant information being provided therein.

Section 6. Subsection (2) of section 627.739, Florida Statutes, is amended to read:

- 627.739 Personal injury protection; optional limitations; deductibles.—
- (2) Insurers shall offer to each applicant and to each policyholder, upon the renewal of an existing policy, deductibles, in amounts of \$250, \$500, and \$1,000. The deductible amount must be applied to 100 percent of the expenses and losses covered under personal injury protection benefits

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coverage issued pursuant to described in s. 627.736. If an

210 insurer has elected to apply the schedule of maximum charges 211 authorized under this chapter, the amount of expenses and losses 212 applicable to the deductible will be limited to 100 percent of such authorized reimbursement limitations or fee schedules. 213 214 After the deductible is met, each insured is eligible to receive 215 up to \$10,000 in total benefits described in s. 627.736(1). 216 However, this subsection shall not be applied to reduce the 217 amount of any benefits received in accordance with s. 218 627.736(1)(c). 219 Section 7. Subsection (1) of section 627.744, Florida 220 Statutes, is amended to read: 221 627.744 Required Preinsurance inspection of private passenger motor vehicles.-222 A private passenger motor vehicle insurance policy 223 224 providing physical damage coverage, including collision or 225 comprehensive coverage, may not be issued in this state unless the insurer has inspected the motor vehicle in accordance with 226 227 this section or has opted out of the inspection required by this 228 section. An insurer opting out of the inspection must file a

be participating in the inspection program under this section
and will not require the preinsurance inspection of its
insureds' motor vehicles. An insurer that files such a manual

233 <u>rule with the office may establish its own preinsurance</u>

234 inspection program.

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manual rule with the office indicating that the insurer will not

235 Section 8. This act shall take effect July 1, 2016.

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