## CHAMBER ACTION

Senate House

.

Representative Grall offered the following:

2

4

5

6

7

8

9

10

11

12

13

1

## Amendment

Remove lines 343-1768 and insert:

- (2) Effective July 1, 2018:
- (a) Notwithstanding any provision of law, motor vehicle insurance policies issued or renewed on or after July 1, 2018, may not include personal injury protection.
- (b) All persons subject to s. 324.022, s. 324.032, s. 627.7415, or s. 627.742, must maintain at least minimum security requirements.
- (c) A new or renewal motor vehicle insurance policy delivered or issued for delivery in this state must provide

561239

Approved For Filing: 4/14/2017 3:50:30 PM

Page 1 of 58

coverage that complies with minimum security requirements.

- d) An existing motor vehicle insurance policy issued before July 1, 2018, that provides personal injury protection and property damage liability coverage and meets the requirements of s. 324.022, on June 30, 2018, but that does not meet minimum security requirements on or after July 1, 2018, is deemed to meet the security requirements of s. 324.022 until such policy is renewed, nonrenewed, or canceled.
- (3) An insurer must allow an insured who has a new or renewal policy providing personal injury protection, which becomes effective before July 1, 2018, and whose policy does not meet minimum security requirements on or after July 1, 2018, to change coverages to obtain coverage providing minimum security requirements that becomes effective on or after July 1, 2018.

  The insurer is not required to provide coverage complying with minimum security requirements in such policies if the insured does not pay the required premium by July 1, 2018, or such later date as the insurer may allow. The insurer must refund any reduction in the premium. The insurer may not impose an additional fee or charge on the insured for such changes in coverage; however, the insurer may charge an additional premium that is actuarially indicated.
- (4) By March 1, 2018, a motor vehicle insurer must provide notice of the provisions of this section to each motor vehicle policyholder who is subject to this section. The notice is

subject to approval by the Office of Insurance Regulation and
must clearly inform the policyholder that:

- (a) The Florida Motor Vehicle No-Fault Law is repealed, effective July 1, 2018, and that on or after that date, the insured is no longer required to maintain personal injury protection insurance coverage, that personal injury protection coverage is no longer available for purchase in this state, and that all new or renewal policies issued on or after that date do not contain such coverage.
- (b) Effective July 1, 2018, a person subject to the financial responsibility requirements of s. 324.022 must maintain minimum security requirements that enable the person to respond in damages for liability on account of accidents arising out of the ownership, maintenance, or use of a motor vehicle in the following amounts:
- 1. Twenty-five thousand dollars for bodily injury to, or the death of, one person in any one accident and, subject to such limits for one person, in the amount of \$50,000 for bodily injury to, or the death of, two or more persons in any one accident; and
- 2. Ten thousand dollars for damage to, or destruction of, property of others in any one accident.
- (c) Personal injury protection coverage pays covered medical expenses for injuries sustained in a motor vehicle accident by the policyholder, passengers, and relatives residing

in the policyholder's household.

- (d) Bodily injury liability coverage protects the insured, up to the coverage limits, against loss if the insured is legally responsible for the death of or bodily injury to others in a motor vehicle accident.
- (e) The policyholder may obtain underinsured motorist coverage, which provides benefits, up to the limits of such coverage, to a policyholder or other insured entitled to recover damages for bodily injury, sickness, disease, or death resulting from a motor vehicle accident with an uninsured or underinsured owner or operator of a motor vehicle.
- insurance policy is effective before July 1, 2018, and contains personal injury protection and property damage liability coverage as required by state law before July 1, 2018, but does not meet minimum security requirements on or after July 1, 2018, the policy is deemed to meet minimum security requirements until it is renewed, nonrenewed, or canceled.
- (g) A policyholder whose new or renewal policy becomes effective before July 1, 2018, but does not meet minimum security requirements on or after July 1, 2018, may change coverages under the policy so as to eliminate personal injury protection and to obtain coverage providing minimum security requirements, including bodily injury liability coverage, which are effective on or after July 1, 2018.

<u>(</u> h	n) If	the	policyh	nolde	r has	any c	questions,	he	or s	he
				,	,	,	' 1 1			
should	contac	ct tr	ne name	and	phone	numbe	er provided	. ın	the	notice.

- (5) This section shall take effect upon this act becoming law.
- Section 9. Subsections (1) and (7) of section 324.021, Florida Statutes, are amended to read:
- 324.021 Definitions; minimum insurance required.—The following words and phrases when used in this chapter shall, for the purpose of this chapter, have the meanings respectively ascribed to them in this section, except in those instances where the context clearly indicates a different meaning:
- (1) MOTOR VEHICLE.—Every self-propelled vehicle which is designed and required to be licensed for use upon a highway, including trailers and semitrailers designed for use with such vehicles, except traction engines, road rollers, farm tractors, power shovels, and well drillers, and every vehicle which is propelled by electric power obtained from overhead wires but not operated upon rails, but not including any bicycle or moped. However, the term "motor vehicle" shall not include any motor vehicle as defined in s. 627.732(3) when the owner of such vehicle has complied with the requirements of ss. 627.730-627.7405, inclusive, unless the provisions of s. 324.051 apply; and, in such case, the applicable proof of insurance provisions of s. 320.02 apply.
  - (7) PROOF OF FINANCIAL RESPONSIBILITY.—Proof That proof of

ability to	respond	d in dam	ages	for	lia	abili	Lty	on	accou	ınt	of
accidents	crashes	arising	out	of	the	use	of	a	motor	veh	icle:

- (a) In the amount of \$25,000 for \$10,000 because of bodily injury to, or the death of, one person in any one accident erash;
- (b) Subject to such limits for one person, in the amount of \$50,000 for \$20,000 because of bodily injury to, or the death of, two or more persons in any one accident erash;
- (c) In the amount of \$10,000  $\underline{\text{for damage}}$  because of injury to, or destruction of,  $\underline{\text{the}}$  property of others in any one accident  $\underline{\text{crash}}$ ; and
- (d) For With respect to commercial motor vehicles and nonpublic sector buses, in the amounts specified in ss. 627.7415 and 627.742, respectively.
- Section 10. Section 324.022, Florida Statutes, is amended to read:
- 324.022 Financial responsibility <u>requirements</u> for property damage.
- (1) (a) Every owner or operator of a motor vehicle required to be registered in this state and every operator of a motor vehicle licensed in this state must shall establish and continuously maintain the ability to respond in damages for liability on account of accidents arising out of the ownership, maintenance, or use of the motor vehicle in the amount of:
- 1. Twenty-five thousand dollars for bodily injury to, or

139

140

141

142

143

144

145

146

147

148

149

150

151

152

153

154

155

156

157

158

159

160

161162

163

## the death of, one person in any one accident;

- 2. Subject to the limits for one person, \$50,000 for bodily injury to, or the death of, two or more persons in any one accident; and \$10,000 because of
- 3. Ten thousand dollars for damage to, or destruction of, property of others in any one accident <del>crash</del>.
- The requirements of paragraph (a) this section may be met by one of the methods established in s. 324.031; by selfinsuring as authorized by s. 768.28(16); or by maintaining a motor vehicle liability insurance an insurance policy providing coverage for property damage liability in the amount of at least \$10,000 because of damage to, or destruction of, property of others in any one accident arising out of the use of the motor vehicle. The requirements of this section may also be met by having a policy which provides coverage in the amount of at least \$60,000 \$30,000 for combined property damage liability and bodily injury liability for any one accident <del>crash</del> arising out of the use of the motor vehicle and which conforms to the requirements of s. 324.151. The policy, with respect to coverage for property damage liability, must meet the applicable requirements of s. 324.151, subject to the usual policy exclusions that have been approved in policy forms by the Office of Insurance Regulation. No insurer shall have any duty to defend uncovered claims irrespective of their joinder with covered claims.

561239

- (2) As used in this section, the term:
  - (a) "Motor vehicle" means any self-propelled vehicle that has four or more wheels and that is of a type designed and required to be licensed for use on the highways of this state, and any trailer or semitrailer designed for use with such vehicle. The term does not include:
    - 1. A mobile home.
  - 2. A motor vehicle that is used in mass transit and designed to transport more than five passengers, exclusive of the operator of the motor vehicle, and that is owned by a municipality, transit authority, or political subdivision of the state.
    - 3. A school bus as defined in s. 1006.25.
  - 4. A vehicle providing for-hire transportation that is subject to the provisions of s. 324.031. A taxicab shall maintain security as required under s. 324.032(1).
  - (b) "Owner" means the person who holds legal title to a motor vehicle or the debtor or lessee who has the right to possession of a motor vehicle that is the subject of a security agreement or lease with an option to purchase.
  - (3) Each nonresident owner or registrant of a motor vehicle that, whether operated or not, has been physically present within this state for more than 90 days during the preceding 365 days shall maintain security as required by subsection (1) that is in effect continuously throughout the

189

190

191

192

193

194

195

196197

198

199

200

201

202

203

204

205

206

207

208

209

210

211

212

213

period the motor vehicle remains within this state.

An The owner or registrant of a motor vehicle who is exempt from the requirements of this section if she or he is a member of the United States Armed Forces and is called to or on active duty outside the United States in an emergency situation is exempt from this section while he or she. The exemption provided by this subsection applies only as long as the member of the Armed Forces is on such active duty outside the United States and applies only while the vehicle is not operated by any person. Upon receipt of a written request by the insured to whom the exemption provided in this subsection applies, the insurer shall cancel the coverages and return any unearned premium or suspend the security required by this section. Notwithstanding s. 324.0221(2) s. 324.0221(3), the department may not suspend the registration or operator's license of an any owner or registrant of a motor vehicle during the time she or he qualifies for an exemption under this subsection. An Any owner or registrant of a motor vehicle who qualifies for the an exemption under this subsection shall immediately notify the department before prior to and at the end of the expiration of the exemption.

Section 11. Subsections (1) and (2) of section 324.0221, Florida Statutes, are amended, and subsection (4) is added to that section, to read:

324.0221 Reports by insurers to the department; suspension 561239

of driver license and vehicle registrations; reinstatement
(1)(a) Each insurer that has issued a policy providing
personal injury protection coverage or property damage liability
coverage shall report the cancellation or nonrenewal thereof to
the department within 10 days after the processing date or
effective date of each cancellation or nonrenewal. Upon the
issuance of a policy providing personal injury protection
coverage or property damage liability coverage to a named
insured not previously insured by the insurer during that
calendar year, the insurer shall report the issuance of the new
policy to the department within 10 days. The report $\underline{\text{must}}$ $\underline{\text{shall}}$
be in $\underline{a}$ the form prescribed by the department and format and
contain any information required by the department and must be
provided in a format that is compatible with the data processing
capabilities of the department. Failure by an insurer to file
proper reports with the department as required by this
subsection constitutes a violation of the Florida Insurance
Code. These records shall be used by the department only for
enforcement and regulatory purposes, including the generation by
the department of data regarding compliance by owners of motor
vehicles with the requirements for financial responsibility
coverage.

(b) With respect to an insurance policy providing personal

injury protection coverage or property damage liability

coverage, each insurer shall notify the named insured, or the

Approved For Filing: 4/14/2017 3:50:30 PM Page 10 of 58

first-named insured in the case of a commercial fleet policy, in writing that any cancellation or nonrenewal of the policy will be reported by the insurer to the department. The notice must also inform the named insured that failure to maintain bodily injury liability personal injury protection coverage and property damage liability coverage on a motor vehicle when required by law may result in the loss of registration and driving privileges in this state and inform the named insured of the amount of the reinstatement fees required by this section. This notice is for informational purposes only, and an insurer is not civilly liable for failing to provide this notice.

- (2) The department shall suspend, after due notice and an opportunity to be heard, the registration and driver license of any owner or registrant of a motor vehicle with respect to which security is required under <u>s. ss.</u> 324.022, <u>s. 324.023</u>, <u>s.</u> 324.032, <u>s. 627.7415</u>, or <u>s. 627.742</u> and 627.733 upon:
- (a) The department's records showing that the owner or registrant of such motor vehicle did not have the in full force and effect when required security in full force and effect that complies with the requirements of ss. 324.022 and 627.733; or
- (b) Notification by the insurer to the department, in a form approved by the department, of cancellation or termination of the required security.
- (4) All suspensions of license or registration under this section for failure to maintain required security that occurred

Approved For Filing: 4/14/2017 3:50:30 PM Page 11 of 58

264	before Ju	ly 1,	2018,	remain	in	full	force	and	effect	after	the
265	effective	date	of th	is act.							

Section 12. Subsection (2) of section 324.051, Florida Statutes, is amended to read:

324.051 Reports of crashes; suspensions of licenses and registrations.—

- (2) (a) Thirty days after receipt of notice of any accident described in paragraph (1) (a) involving a motor vehicle within this state, the department shall suspend, after due notice and opportunity to be heard, the license of each operator and all registrations of the owner of the vehicles operated by such operator whether or not involved in such crash and, in the case of a nonresident owner or operator, shall suspend such nonresident's operating privilege in this state, unless such operator or owner shall, prior to the expiration of such 30 days, be found by the department to be exempt from the operation of this chapter, based upon evidence satisfactory to the department that:
- 1. The motor vehicle was legally parked at the time of such crash.
- 2. The motor vehicle was owned by the United States Government, this state, or any political subdivision of this state or any municipality therein.
- 3. Such operator or owner has secured a duly acknowledged written agreement providing for release from liability by all

Approved For Filing: 4/14/2017 3:50:30 PM Page 12 of 58

parties injured as the result of said crash and has complied with one of the provisions of s. 324.031.

- 4. Such operator or owner has deposited with the department security to conform with s. 324.061 when applicable and has complied with one of the provisions of s. 324.031.
- 5. One year has elapsed since such owner or operator was suspended pursuant to subsection (3), the owner or operator has complied with one of the provisions of s. 324.031, and no bill of complaint of which the department has notice has been filed in a court of competent jurisdiction.
  - (b) This subsection shall not apply:
- 1. To such operator or owner if such operator or owner had in effect at the time of such crash or traffic conviction  $\underline{a}$   $\underline{\text{motor vehicle an automobile}} \text{ liability policy with respect to all of the registered motor vehicles owned by such operator or owner.}$
- 2. To such operator, if not the owner of such motor vehicle, if there was in effect at the time of such crash or traffic conviction a motor vehicle an automobile liability policy or bond with respect to his or her operation of motor vehicles not owned by him or her.
- 3. To such operator or owner if the liability of such operator or owner for damages resulting from such crash is, in the judgment of the department, covered by any other form of liability insurance or bond.

Approved For Filing: 4/14/2017 3:50:30 PM Page 13 of 58

4. To  $\underline{a}$  any person who has obtained from the department a certificate of self-insurance, in accordance with s. 324.171, or to a any person operating a motor vehicle for such self-insurer.

No such policy or bond shall be effective under this subsection unless it contains limits of not less than those specified in s.324.021(7).

Section 13. Subsection (1) of section 324.091, Florida Statutes, is amended to read:

324.091 Notice to department; notice to insurer.-

(1) Each owner and operator involved in a crash or conviction case within the purview of this chapter shall furnish evidence of automobile liability insurance or motor vehicle liability insurance within 14 days after the date of the mailing of notice of crash by the department in the form and manner as it may designate. Upon receipt of evidence that a an automobile liability policy or motor vehicle liability policy was in effect at the time of the crash or conviction case, the department shall forward to the insurer such information for verification in a method as determined by the department. The insurer shall respond to the department within 20 days after the notice whether or not such information is valid. If the department determines that a an automobile liability policy or motor vehicle liability policy was not in effect and did not provide coverage for both the owner and the operator, it shall take

Approved For Filing: 4/14/2017 3:50:30 PM Page 14 of 58

339 action as it is authorized to do under this chapter.

340 Section 14. Section 324.151, Florida Statutes, is amended to read:

- 324.151 Motor vehicle liability policies; required provisions.—
  - (1) As used in this section, the term:
- (a) "Newly acquired vehicle" means a vehicle owned by a named insured or resident relative of the named insured which was acquired 30 days or less before an accident.
- (b) "Resident relative" means a person related to a named insured by any degree by blood, marriage, or adoption, including a ward or foster child, who usually makes her or his home in the same family unit as the named insured, whether or not he or she is temporarily living elsewhere.
- (c) "Temporary substitute vehicle" means a motor vehicle as defined in s. 320.01(1) that is not owned by the named insured which is temporarily used with the permission of the owner as a substitute for a motor vehicle designated on the policy when the vehicle designated on the policy is withdrawn from normal use because of breakdown, repair, servicing, loss, or destruction.
- $\underline{(2)}$  (1) A motor vehicle liability policy  $\underline{as}$  to be proof of financial responsibility under s. 324.031(1), shall be issued to owners  $\underline{and}$  or operators of motor vehicles under the following provisions:

(a) A motor vehicle liability insurance policy issued to
an owner of a motor vehicle registered in this state must An
owner's liability insurance policy shall designate by explicit
description or by appropriate reference all motor vehicles with
respect to which coverage is thereby granted. The policy must
and shall insure the person or persons owner named therein and
any resident relative of a named insured other person as
operator using such motor vehicle or motor vehicles with the
express or implied permission of such owner against loss from
the liability imposed by law for damage arising out of the
ownership, maintenance, or use of $\underline{\text{any such}}$ motor vehicle, $\underline{\text{except}}$
as otherwise provided in this section. The policy shall also
insure any person operating an insured motor vehicle with the
express or implied permission of the named insured against loss
from liability imposed by law for damage arising out of the use
of such vehicle. However, the insurer may exclude in its policy
liability coverage for a motor vehicle not designated as an
insured vehicle on the policy if such motor vehicle does not
qualify as a newly acquired vehicle, does not qualify as a
$\underline{\text{temporary}}$ substitute vehicle, and was owned by an insured or $\underline{\text{was}}$
furnished for an insured's regular use for more than 30
$\underline{\text{consecutive days before an accident}} \ \underline{\text{or motor vehicles within the}}$
United States or the Dominion of Canada, subject to limits,
exclusive of interest and costs with respect to each such motor
vehicle as is provided for under s. 324.021(7). Insurers may

make available, with respect to property damage liability coverage, a deductible amount not to exceed \$500. In the event of a property damage loss covered by a policy containing a property damage deductible provision, the insurer shall pay to the third-party claimant the amount of any property damage liability settlement or judgment, subject to policy limits, as if no deductible existed.

- (b) A motor vehicle liability insurance policy issued to a person who does not own a motor vehicle registered in this state and is not already insured under a policy described in subsection (a) must An operator's motor vehicle liability policy of insurance shall insure the person or persons named in the policy therein against loss from the liability imposed upon him or her by law for damages arising out of the use by the person of any motor vehicle not owned by him or her, unless the vehicle was furnished for the named insured's regular use and used by the named insured for more than 30 consecutive days before an accident with the same territorial limits and subject to the same limits of liability as referred to above with respect to an owner's policy of liability insurance.
- (c) All such motor vehicle liability policies shall state the name and address of the named insured, the coverage afforded by the policy, the premium charged therefor, the policy period, the limits of liability, and shall contain an agreement or be endorsed that insurance is provided in accordance with the

Approved For Filing: 4/14/2017 3:50:30 PM Page 17 of 58

death or property damage or both and is subject to all
provisions of this chapter. $\underline{\text{The}}$ Said policies $\underline{\text{must}}$ shall also
contain a provision that the satisfaction by an insured of a
judgment for such injury or damage shall not be a condition
precedent to the right or duty of the insurance carrier to make
payment on account of such injury or damage, and shall also
contain a provision that bankruptcy or insolvency of the insured
or of the insured's estate shall not relieve the insurance
carrier of any of its obligations under $\underline{\text{the}}$ said policy.
However, the policies may contain provisions excluding liability
coverage for a vehicle used outside of the United States or
Canada at the time of an accident.

(3) (2) The provisions of this section shall not be applicable to any automobile liability policy unless and until it is furnished as proof of financial responsibility for the future pursuant to s. 324.031, and then only from and after the date said policy is so furnished.

Section 15. Section 324.161, Florida Statutes, is amended to read:

324.161 Proof of financial responsibility; deposit.— Annually, before any certificate of insurance may be issued to a person, including any firm, partnership, association, corporation, or other person, other than a natural person, proof of a certificate of deposit of  $\frac{$60,000}{$30,000}$  issued and held

Approved For Filing: 4/14/2017 3:50:30 PM Page 18 of 58

by a financial institution must be submitted to the department. A power of attorney will be issued to and held by the department and may be executed upon a judgment issued against such person making the deposit, for damages for because of bodily injury to or death of any person or for damages for because of injury to or destruction of property resulting from the use or operation of any motor vehicle occurring after such deposit was made. Money so deposited is shall not be subject to attachment or execution unless such attachment or execution shall arise out of a suit for such damages as aforesaid.

Section 16. Subsections (1) and (2) of section 324.171, Florida Statutes, are amended to read:

## 324.171 Self-insurer.-

- obtaining a certificate of self-insurance from the department.

  <u>Upon which may, in its discretion and upon</u> application of such a person, the department may issue a said certificate of self-insurance if the applicant when such person has satisfied the requirements of this section to qualify as a self-insurer under this section:
- (a) A private individual with private passenger vehicles  $\underline{\text{must}}$  shall possess a net unencumbered worth of at least  $\underline{\$60,000}$   $\underline{\$40,000}$ .
- (b) A person, including any firm, partnership,
  association, corporation, or other person, other than a natural
  561239

Approved For Filing: 4/14/2017 3:50:30 PM Page 19 of 58

464 person, must shall:

- 1. Possess a net unencumbered worth of at least  $\frac{$60,000}{}$   $\frac{$40,000}{}$  for the first motor vehicle and  $\frac{$30,000}{}$   $\frac{$20,000}{}$  for each additional motor vehicle; or
- by the department to be financially responsible for potential losses. The department must annually determine the minimum net worth sufficient to satisfy this section as determined annually by the department, pursuant to rules adopted promulgated by the department, with the assistance of the Office of Insurance Regulation of the Financial Services Commission, to be financially responsible for potential losses. The rules must consider any shall take into consideration excess insurance carried by the applicant. The department's determination shall be based upon reasonable actuarial principles considering the frequency, severity, and loss development of claims incurred by casualty insurers writing coverage on the type of motor vehicles for which a certificate of self-insurance is desired.
- (c) The owner of a commercial motor vehicle, as defined in  $s.\ 207.002$  or  $s.\ 320.01$ , may qualify as a self-insurer subject to the standards provided for in subparagraph (b)2.
- (2) The self-insurance certificate shall provide limits of liability insurance in the amounts specified under s. 324.021(7) or s. 627.7415 and shall provide personal injury protection coverage under s. 627.733(3)(b).

Approved For Filing: 4/14/2017 3:50:30 PM Page 20 of 58

Section 17. Section 324.251, Florida Statutes, is amended to read:

324.251 Short title.—This chapter may be cited as the "Financial Responsibility Law of  $\underline{2017}$   $\underline{1955}$ " and shall become effective at 12:01 a.m.,  $\underline{\text{July 1, 2018}}$  October 1, 1955.

Section 18. Paragraph (o) of subsection (1) of section 626.9541, Florida Statutes, is amended to read:

626.9541 Unfair methods of competition and unfair or deceptive acts or practices defined.—

- (1) UNFAIR METHODS OF COMPETITION AND UNFAIR OR DECEPTIVE ACTS.—The following are defined as unfair methods of competition and unfair or deceptive acts or practices:
- (o) Illegal dealings in premiums; excess or reduced charges for insurance.—
- 1. Knowingly collecting any sum as a premium or charge for insurance, which is not then provided, or is not in due course to be provided, subject to acceptance of the risk by the insurer, by an insurance policy issued by an insurer as permitted by this code.
- 2. Knowingly collecting as a premium or charge for insurance any sum in excess of or less than the premium or charge applicable to such insurance, in accordance with the applicable classifications and rates as filed with and approved by the office, and as specified in the policy; or, in cases when classifications, premiums, or rates are not required by this

Approved For Filing: 4/14/2017 3:50:30 PM Page 21 of 58

514

515

516

517

518

519

520

521

522

523524

525

526

527

528

529

530

531

532

533

534

535

536

537

538

code to be so filed and approved, premiums and charges collected from a Florida resident in excess of or less than those specified in the policy and as fixed by the insurer. Notwithstanding any other provision of law, this provision shall not be deemed to prohibit the charging and collection, by surplus lines agents licensed under part VIII of this chapter, of the amount of applicable state and federal taxes, or fees as authorized by s. 626.916(4), in addition to the premium required by the insurer or the charging and collection, by licensed agents, of the exact amount of any discount or other such fee charged by a credit card facility in connection with the use of a credit card, as authorized by subparagraph (q) 3., in addition to the premium required by the insurer. This subparagraph shall not be construed to prohibit collection of a premium for a universal life or a variable or indeterminate value insurance policy made in accordance with the terms of the contract.

- 3.a. Imposing or requesting an additional premium for a policy of motor vehicle liability, personal injury protection, medical payment, or collision insurance or any combination thereof or refusing to renew the policy solely because the insured was involved in a motor vehicle accident unless the insurer's file contains information from which the insurer in good faith determines that the insured was substantially at fault in the accident.
- b. An insurer which imposes and collects such a surcharge 561239

Approved For Filing: 4/14/2017 3:50:30 PM Page 22 of 58

539

540

541

542

543

544

545

546

547

548

549

550

551

552

553

554

555

556

557

558

559

560

561

562

563

or which refuses to renew such policy shall, in conjunction with the notice of premium due or notice of nonrenewal, notify the named insured that he or she is entitled to reimbursement of such amount or renewal of the policy under the conditions listed below and will subsequently reimburse him or her or renew the policy, if the named insured demonstrates that the operator involved in the accident was:

- (I) Lawfully parked;
- (II) Reimbursed by, or on behalf of, a person responsible for the accident or has a judgment against such person;
- (III) Struck in the rear by another vehicle headed in the same direction and was not convicted of a moving traffic violation in connection with the accident;
- (IV) Hit by a "hit-and-run" driver, if the accident was reported to the proper authorities within 24 hours after discovering the accident;
- (V) Not convicted of a moving traffic violation in connection with the accident, but the operator of the other automobile involved in such accident was convicted of a moving traffic violation;
- (VI) Finally adjudicated not to be liable by a court of competent jurisdiction;
- (VII) In receipt of a traffic citation which was dismissed or nolle prossed; or
- (VIII) Not at fault as evidenced by a written statement

561239

from the insured establishing facts demonstrating lack of fault which are not rebutted by information in the insurer's file from which the insurer in good faith determines that the insured was substantially at fault.

- c. In addition to the other provisions of this subparagraph, an insurer may not fail to renew a policy if the insured has had only one accident in which he or she was at fault within the current 3-year period. However, an insurer may nonrenew a policy for reasons other than accidents in accordance with s. 627.728. This subparagraph does not prohibit nonrenewal of a policy under which the insured has had three or more accidents, regardless of fault, during the most recent 3-year period.
- 4. Imposing or requesting an additional premium for, or refusing to renew, a policy for motor vehicle insurance solely because the insured committed a noncriminal traffic infraction as described in s. 318.14 unless the infraction is:
- a. A second infraction committed within an 18-month period, or a third or subsequent infraction committed within a 36-month period.
- b. A violation of s. 316.183, when such violation is a result of exceeding the lawful speed limit by more than 15 miles per hour.
- 5. Upon the request of the insured, the insurer and licensed agent shall supply to the insured the complete proof of

Approved For Filing: 4/14/2017 3:50:30 PM Page 24 of 58

fault or other criteria which justifies the additional charge or cancellation.

- 6. No insurer shall impose or request an additional premium for motor vehicle insurance, cancel or refuse to issue a policy, or refuse to renew a policy because the insured or the applicant is a handicapped or physically disabled person, so long as such handicap or physical disability does not substantially impair such person's mechanically assisted driving ability.
- 7. No insurer may cancel or otherwise terminate any insurance contract or coverage, or require execution of a consent to rate endorsement, during the stated policy term for the purpose of offering to issue, or issuing, a similar or identical contract or coverage to the same insured with the same exposure at a higher premium rate or continuing an existing contract or coverage with the same exposure at an increased premium.
- 8. No insurer may issue a nonrenewal notice on any insurance contract or coverage, or require execution of a consent to rate endorsement, for the purpose of offering to issue, or issuing, a similar or identical contract or coverage to the same insured at a higher premium rate or continuing an existing contract or coverage at an increased premium without meeting any applicable notice requirements.
- 9. No insurer shall, with respect to premiums charged for 561239

Approved For Filing: 4/14/2017 3:50:30 PM Page 25 of 58

motor vehicle insurance, unfairly discriminate solely on the basis of age, sex, marital status, or scholastic achievement.

- 10. Imposing or requesting an additional premium for motor vehicle comprehensive or uninsured motorist coverage solely because the insured was involved in a motor vehicle accident or was convicted of a moving traffic violation.
- 11. No insurer shall cancel or issue a nonrenewal notice on any insurance policy or contract without complying with any applicable cancellation or nonrenewal provision required under the Florida Insurance Code.
- 12. No insurer shall impose or request an additional premium, cancel a policy, or issue a nonrenewal notice on any insurance policy or contract because of any traffic infraction when adjudication has been withheld and no points have been assessed pursuant to s. 318.14(9) and (10). However, this subparagraph does not apply to traffic infractions involving accidents in which the insurer has incurred a loss due to the fault of the insured.
- Section 19. Subsection (1) of section 627.06501, Florida Statutes, is amended to read:
- 627.06501 Insurance discounts for certain persons completing driver improvement course.—
- (1) Any rate, rating schedule, or rating manual for the liability, personal injury protection, and collision coverages of a motor vehicle insurance policy filed with the office may

provide for an appropriate reduction in premium charges as to such coverages <u>if</u> when the principal operator on the covered vehicle has successfully completed a driver improvement course approved and certified by the Department of Highway Safety and Motor Vehicles which is effective in reducing <u>accident crash</u> or violation rates, or both, as determined pursuant to s.

318.1451(5). Any discount, not to exceed 10 percent, used by an insurer is presumed to be appropriate unless credible data demonstrates otherwise.

Section 20. Subsection (1) of section 627.0652, Florida Statutes, is amended to read:

627.0652 Insurance discounts for certain persons completing safety course.—

(1) Any rates, rating schedules, or rating manuals for the liability, personal injury protection, and collision coverages of a motor vehicle insurance policy filed with the office must shall provide for an appropriate reduction in premium charges as to such coverages if when the principal operator on the covered vehicle is an insured 55 years of age or older who has successfully completed a motor vehicle accident prevention course approved by the Department of Highway Safety and Motor Vehicles. Any discount used by an insurer is presumed to be appropriate unless credible data demonstrates otherwise.

Section 21. Subsections (1), (3), and (6) of section

Section 21. Subsections (1), (3), and (6) of section 627.0653, Florida Statutes, are amended to read:

Approved For Filing: 4/14/2017 3:50:30 PM Page 27 of 58

- 627.0653 Insurance discounts for specified motor vehicle equipment.—
- (1) Any rates, rating schedules, or rating manuals for the liability, personal injury protection, and collision coverages of a motor vehicle insurance policy filed with the office shall provide a premium discount if the insured vehicle is equipped with factory-installed, four-wheel antilock brakes.
- (3) Any rates, rating schedules, or rating manuals for personal injury protection coverage and medical payments coverage, if offered, of a motor vehicle insurance policy filed with the office shall provide a premium discount if the insured vehicle is equipped with one or more air bags which are factory installed.
- (6) The Office of Insurance Regulation may approve a premium discount to any rates, rating schedules, or rating manuals for the liability, personal injury protection, and collision coverages of a motor vehicle insurance policy filed with the office if the insured vehicle is equipped with autonomous driving technology or electronic vehicle collision avoidance technology that is factory installed or a retrofitted system and that complies with National Highway Traffic Safety Administration standards.
- Section 22. Section 627.4132, Florida Statutes, is amended to read:
- 627.4132 Stacking of coverages prohibited.—If an insured 561239

Approved For Filing: 4/14/2017 3:50:30 PM Page 28 of 58

or named insured is protected by any type of motor vehicle insurance policy for liability, personal injury protection, or other coverage, the policy <u>must shall</u> provide that the insured or named insured is protected only to the extent of the coverage she or he has on the vehicle involved in the accident. However, if none of the insured's or named insured's vehicles <u>are is</u> involved in the accident, coverage is available only to the extent of coverage on any one of the vehicles with applicable coverage. Coverage on any other vehicles <u>may shall</u> not be added to or stacked upon that coverage. This section does not apply:

- (1) To uninsured motorist coverage which is separately governed by s. 627.727.
- (2) To reduce the coverage available by reason of insurance policies insuring different named insureds.

Section 23. Section 627.7263, Florida Statutes, is amended to read:

- 627.7263 Rental and leasing driver's insurance to be primary; exception.—
- (1) The valid and collectible liability insurance or personal injury protection insurance providing coverage for the lessor of a motor vehicle for rent or lease is primary unless otherwise stated in at least 10-point type on the face of the rental or lease agreement. Such insurance is primary for the limits of liability in an amount not less than the minimum limits described in and personal injury protection coverage as

714 required by s. 324.021(7) ss. 324.021(7) and 627.736.

(2) If the lessee's coverage is to be primary, the rental or lease agreement must contain the following language, in at least 10-point type:

"The valid and collectible liability insurance and personal injury protection insurance of an any authorized rental or leasing driver is primary for the limits of liability in an amount not less than the minimum limits described in and personal injury protection coverage required s. 324.021(7) by ss. 324.021(7) and 627.736, Florida Statutes."

Section 24. Subsections (1) and (7) of section 627.727, Florida Statutes, are amended to read:

- 627.727 Motor vehicle insurance; uninsured and underinsured vehicle coverage; insolvent insurer protection.—
- (1) No motor vehicle liability insurance policy which provides bodily injury liability coverage shall be delivered or issued for delivery in this state with respect to any specifically insured or identified motor vehicle registered or principally garaged in this state unless uninsured motor vehicle coverage is provided therein or supplemental thereto for the protection of persons insured thereunder who are legally entitled to recover damages from owners or operators of uninsured motor vehicles because of bodily injury, sickness, or disease, including death, resulting therefrom. However, the

Approved For Filing: 4/14/2017 3:50:30 PM

Page 30 of 58

739

740

741

742

743

744

745746

747

748

749

750

751

752

753

754

755

756

757

758

759

760

761

762

763

coverage required under this section is not applicable if when, or to the extent that, an insured named in the policy makes a written rejection of the coverage on behalf of all insureds under the policy. If When a motor vehicle is leased for a period of 1 year or longer and the lessor of such vehicle, by the terms of the lease contract, provides liability coverage on the leased vehicle, the lessee of such vehicle shall have the sole privilege to reject uninsured motorist coverage or to select lower limits than the bodily injury liability limits, regardless of whether the lessor is qualified as a self-insurer pursuant to s. 324.171. Unless an insured, or lessee having the privilege of rejecting uninsured motorist coverage, requests such coverage or requests higher uninsured motorist limits in writing, the coverage or such higher uninsured motorist limits need not be provided in or supplemental to any other policy which renews, extends, changes, supersedes, or replaces an existing policy with the same bodily injury liability limits when an insured or lessee had rejected the coverage. When an insured or lessee has initially selected limits of uninsured motorist coverage lower than her or his bodily injury liability limits, higher limits of uninsured motorist coverage need not be provided in or supplemental to any other policy that which renews, extends, changes, supersedes, or replaces an existing policy with the same bodily injury liability limits unless an insured requests higher uninsured motorist coverage in writing. The rejection or

561239

764

765

766

767

768

769

770

771

772

773

774

775

776

777

778

779

780

781

782

783

784

785

786 787

788

selection of lower limits shall be made on a form approved by the office. The form must shall fully advise the applicant of the nature of the coverage and must shall state that the coverage is equal to bodily injury liability limits unless lower limits are requested or the coverage is rejected. The heading of the form shall be in 12-point bold type and shall state: "You are electing not to purchase certain valuable coverage that which protects you and your family or you are purchasing uninsured motorist limits less than your bodily injury liability limits when you sign this form. Please read carefully." If this form is signed by a named insured, it will be conclusively presumed that there was an informed, knowing rejection of coverage or election of lower limits on behalf of all insureds. The insurer shall notify the named insured at least annually of her or his options as to the coverage required by this section. Such notice must shall be part of, and attached to, the notice of premium, must shall provide for a means to allow the insured to request such coverage, and must shall be given in a manner approved by the office. Receipt of this notice does not constitute an affirmative waiver of the insured's right to uninsured motorist coverage if where the insured has not signed a selection or rejection form. The coverage described under this section shall be over and above, but shall not duplicate, the benefits available to an insured under any workers' compensation law, personal injury protection benefits, disability benefits

561239

law, or similar law; under any automobile medical payments expense coverage; under any motor vehicle liability insurance coverage; or from the owner or operator of the uninsured motor vehicle or any other person or organization jointly or severally liable together with such owner or operator for the accident; and such coverage shall cover the difference, if any, between the sum of such benefits and the damages sustained, up to the maximum amount of such coverage provided under this section. The amount of coverage available under this section may shall not be reduced by a setoff against any coverage, including liability insurance. Such coverage does shall not inure directly or indirectly to the benefit of any workers' compensation or disability benefits carrier or any person or organization qualifying as a self-insurer under any workers' compensation or disability benefits law or similar law.

- (7) (a) For uninsured and underinsured vehicle coverage issued before July 1, 2018, the legal liability of an uninsured motorist coverage insurer does not include damages in tort for pain, suffering, mental anguish, and inconvenience unless the injury or disease is described in one or more of paragraphs (a) (d) of s. 627.737(2).
- (b) For uninsured and underinsured vehicle coverage issued on or after July 1, 2018, the legal liability of an uninsured motorist coverage insurer includes damages in tort for pain, suffering, disability or physical impairment, disfigurement,

Page 33 of 58

mental anguish, inconvenience, and the loss of capacity for the enjoyment of life experienced in the past and to be experienced in the future.

Section 25. Subsection (1) and paragraphs (a) and (b) of subsection (2) of section 627.7275, Florida Statutes, are amended to read:

627.7275 Motor vehicle liability.-

- (1) A motor vehicle insurance policy providing personal injury protection as set forth in s. 627.736 may not be delivered or issued for delivery in this state for a with respect to any specifically insured or identified motor vehicle registered or principally garaged in this state must provide bodily injury liability coverage and unless the policy also provides coverage for property damage liability coverage as required under by s. 324.022.
- (2) (a) Insurers writing motor vehicle insurance in this state shall make available, subject to the insurers' usual underwriting restrictions:
- 1. Coverage under policies as described in subsection (1) to an applicant for private passenger motor vehicle insurance coverage who is seeking the coverage in order to reinstate the applicant's driving privileges in this state if the driving privileges were revoked or suspended pursuant to s. 316.646 or s. 324.0221 due to the failure of the applicant to maintain required security.

Approved For Filing: 4/14/2017 3:50:30 PM Page 34 of 58

- 2. Coverage under policies as described in subsection (1), which also provides bodily injury liability coverage and property damage liability coverage for bodily injury, death, and property damage arising out of the ownership, maintenance, or use of the motor vehicle in an amount not less than the minimum limits described in s. 324.021(7) or s. 324.023 and conforms to the requirements of s. 324.151, to an applicant for private passenger motor vehicle insurance coverage who is seeking the coverage in order to reinstate the applicant's driving privileges in this state after such privileges were revoked or suspended under s. 316.193 or s. 322.26(2) for driving under the influence.
- (b) The policies described in paragraph (a) shall be issued for at least 6 months and, as to the minimum coverages required under this section, may not be canceled by the insured for any reason or by the insurer after 60 days, during which period the insurer is completing the underwriting of the policy. After the insurer has completed underwriting the policy, the insurer shall notify the Department of Highway Safety and Motor Vehicles that the policy is in full force and effect and is not cancelable for the remainder of the policy period. A premium shall be collected and the coverage is in effect for the 60-day period during which the insurer is completing the underwriting of the policy whether or not the person's driver license, motor vehicle tag, and motor vehicle registration are in effect. Once

Approved For Filing: 4/14/2017 3:50:30 PM Page 35 of 58

the non	cancelable	e provision	s of the	policy	become	effective	$\cdot$ , the
bodily	injury lia	ability and	d propert	y damage	e liabil	<u>lity</u> cover	ages
for bod	<del>lily injur</del> y	y, property	<del>damage,</del>	and per	rsonal i	injury	
protect	<del>ion</del> may no	ot be reduc	ced below	the mir	nimum li	imits requ	uired
under s	. 324.021	or s. 324.	023 duri	ng the p	oolicy p	period.	

Section 26. Paragraph (a) of subsection (1) of section 627.728, Florida Statutes, is amended to read:

627.728 Cancellations; nonrenewals.-

- (1) As used in this section, the term:
- (a) "Policy" means the bodily injury and property damage liability, personal injury protection, medical payments, comprehensive, collision, and uninsured motorist coverage portions of a policy of motor vehicle insurance delivered or issued for delivery in this state:
- 1. Insuring a natural person as named insured or one or more related individuals  $\underline{\text{who are residents}}$   $\underline{\text{resident}}$  of the same household; and
- 2. Insuring only a motor vehicle of the private passenger type or station wagon type which is not used as a public or livery conveyance for passengers or rented to others; or insuring any other four-wheel motor vehicle having a load capacity of 1,500 pounds or less which is not used in the occupation, profession, or business of the insured other than farming; other than any policy issued under an automobile insurance assigned risk plan or covering garage, automobile

Approved For Filing: 4/14/2017 3:50:30 PM Page 36 of 58

sales agency, repair shop, service station, or public parking place operation hazards.

- The term "policy" does not include a binder as defined in s. 627.420 unless the duration of the binder period exceeds 60 days.
- Section 27. Subsection (1), paragraph (a) of subsection (5), and subsection (7) of section 627.7295, Florida Statutes, are amended to read:
  - 627.7295 Motor vehicle insurance contracts.-
  - (1) As used in this section, the term:
- (a) "Policy" means a motor vehicle insurance policy that provides bodily injury liability coverage and personal injury protection coverage, property damage liability coverage, or both.
- (b) "Binder" means a binder that provides motor vehicle bodily injury liability coverage personal injury protection and property damage liability coverage.
- (5)(a) A licensed general lines agent may charge a perpolicy fee up not to exceed \$10 to cover the administrative costs of the agent associated with selling the motor vehicle insurance policy if the policy covers only bodily injury liability coverage personal injury protection coverage as provided by s. 627.736 and property damage liability coverage as provided by s. 627.7275 and if no other insurance is sold or

Approved For Filing: 4/14/2017 3:50:30 PM Page 37 of 58

issued in conjunction with or collateral to the policy. The fee is not considered part of the premium.

- (7) A policy of private passenger motor vehicle insurance 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 from the insured. An insurer, agent, or premium finance company may not, directly or indirectly, take any action that results resulting in the insured paying 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.
  - (a) This subsection does not apply:
- $\underline{1.}$  If an insured or 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.
- $\underline{2.}$  To 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.
- $\underline{\text{3.}}$  If This subsection does not apply if all policy payments are paid pursuant to a payroll deduction plan, an

Approved For Filing: 4/14/2017 3:50:30 PM Page 38 of 58

automatic electronic funds transfer payment plan from the policyholder, or a recurring credit card or debit card agreement with the insurer.

- (b) This subsection and subsection (4) do not apply if:
- 1. 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, bodily injury liability and personal injury protection pursuant to ss. 627.730-627.7405; motor vehicle property damage liability coverage 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
- 2. 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.
- Section 28. Subsections (3) and (4), paragraphs (c) and (h) of subsection (5), paragraphs (a) and (g) of subsection (6), and subsections (8) and (16) of section 627.736, Florida Statutes, are amended to read:

Approved For Filing: 4/14/2017 3:50:30 PM Page 39 of 58

964

965

966

967

968

969

970

971

972

973

974

975

976

977

978

979

980

981

982

983

984

985

986

987

988

- 627.736 Required personal injury protection benefits; exclusions; priority; claims.—
- INSURED'S RIGHTS TO RECOVERY OF SPECIAL DAMAGES IN (3) TORT CLAIMS.—No insurer shall have a lien on any recovery in tort by judgment, settlement, or otherwise for personal injury protection benefits, whether suit has been filed or settlement has been reached without suit. An injured party who is entitled to bring suit under the provisions of ss. 627.732-627.737, 627.7403, and 627.7405  $\frac{627.730-627.7405}{627.7405}$ , or his or her legal representative, shall have no right to recover any damages for which personal injury protection benefits are paid or payable. The plaintiff may prove all of his or her special damages notwithstanding this limitation, but if special damages are introduced in evidence, the trier of facts, whether judge or jury, shall not award damages for personal injury protection benefits paid or payable. In all cases in which a jury is required to fix damages, the court shall instruct the jury that the plaintiff shall not recover such special damages for personal injury protection benefits paid or payable.
- (4) PAYMENT OF BENEFITS.—Benefits due from an insurer under ss. 627.732-627.737, 627.7403, and 627.7405 627.730-627.7405 are primary, except that benefits received under any workers' compensation law must be credited against the benefits provided by subsection (1) and are due and payable as loss accrues upon receipt of reasonable proof of such loss and the

561239

Approved For Filing: 4/14/2017 3:50:30 PM Page 40 of 58

amount of expenses and loss incurred which are covered by the policy issued under ss. 627.732-627.737, 627.7403, and 627.7405 627.730-627.7405. If the Agency for Health Care Administration provides, pays, or becomes liable for medical assistance under the Medicaid program related to injury, sickness, disease, or death arising out of the ownership, maintenance, or use of a motor vehicle, the benefits under ss. 627.732-627.737, 627.7403, and 627.7405 627.730-627.7405 are subject to the Medicaid program. However, within 30 days after receiving notice that the Medicaid program paid such benefits, the insurer shall repay the full amount of the benefits to the Medicaid program.

- (a) An insurer may require written notice to be given as soon as practicable after an accident involving a motor vehicle with respect to which the policy affords the security required by ss. 627.732-627.737, 627.7403, and 627.7405 627.730-627.7405.
- (b) Personal injury protection insurance benefits paid pursuant to this section are overdue if not paid within 30 days after the insurer is furnished written notice of the fact of a covered loss and of the amount of same. However:
- 1. If written notice of the entire claim is not furnished to the insurer, any partial amount supported by written notice is overdue if not paid within 30 days after written notice is furnished to the insurer. Any part or all of the remainder of the claim that is subsequently supported by written notice is overdue if not paid within 30 days after written notice is

Page 41 of 58

Approved For Filing: 4/14/2017 3:50:30 PM

1014 furnished to the insurer.

- 2. If an insurer pays only a portion of a claim or rejects a claim, the insurer shall provide at the time of the partial payment or rejection an itemized specification of each item that the insurer had reduced, omitted, or declined to pay and any information that the insurer desires the claimant to consider related to the medical necessity of the denied treatment or to explain the reasonableness of the reduced charge if this does not limit the introduction of evidence at trial. The insurer must also include the name and address of the person to whom the claimant should respond and a claim number to be referenced in future correspondence.
- 3. If an insurer pays only a portion of a claim or rejects a claim due to an alleged error in the claim, the insurer, at the time of the partial payment or rejection, shall provide an itemized specification or explanation of benefits due to the specified error. Upon receiving the specification or explanation, the person making the claim, at the person's option and without waiving any other legal remedy for payment, has 15 days to submit a revised claim, which shall be considered a timely submission of written notice of a claim.
- 4. Notwithstanding the fact that written notice has been furnished to the insurer, payment is not overdue if the insurer has reasonable proof that the insurer is not responsible for the payment.

Approved For Filing: 4/14/2017 3:50:30 PM Page 42 of 58

- 5. For the purpose of calculating the extent to which benefits are overdue, payment shall be treated as being made on the date a draft or other valid instrument that is equivalent to payment was placed in the United States mail in a properly addressed, postpaid envelope or, if not so posted, on the date of delivery.
- 6. This paragraph does not preclude or limit the ability of the insurer to assert that the claim was unrelated, was not medically necessary, or was unreasonable or that the amount of the charge was in excess of that permitted under, or in violation of, subsection (5). Such assertion may be made at any time, including after payment of the claim or after the 30-day period for payment set forth in this paragraph.
- (c) Upon receiving notice of an accident that is potentially covered by personal injury protection benefits, the insurer must reserve \$5,000 of personal injury protection benefits for payment to physicians licensed under chapter 458 or chapter 459 or dentists licensed under chapter 466 who provide emergency services and care, as defined in s. 395.002, or who provide hospital inpatient care. The amount required to be held in reserve may be used only to pay claims from such physicians or dentists until 30 days after the date the insurer receives notice of the accident. After the 30-day period, any amount of the reserve for which the insurer has not received notice of such claims may be used by the insurer to pay other claims. The

Approved For Filing: 4/14/2017 3:50:30 PM Page 43 of 58

time periods specified in paragraph (b) for payment of personal injury protection benefits are tolled for the period of time that an insurer is required to hold payment of a claim that is not from such physician or dentist to the extent that the personal injury protection benefits not held in reserve are insufficient to pay the claim. This paragraph does not require an insurer to establish a claim reserve for insurance accounting purposes.

- (d) All overdue payments bear simple interest at the rate established under s. 55.03 or the rate established in the insurance contract, whichever is greater, for the quarter in which the payment became overdue, calculated from the date the insurer was furnished with written notice of the amount of covered loss. Interest is due at the time payment of the overdue claim is made.
- (e) The insurer of the owner of a motor vehicle shall pay personal injury protection benefits for:
- 1. Accidental bodily injury sustained in this state by the owner while occupying a motor vehicle, or while not an occupant of a self-propelled vehicle if the injury is caused by physical contact with a motor vehicle.
- 2. Accidental bodily injury sustained outside this state, but within the United States of America or its territories or possessions or Canada, by the owner while occupying the owner's motor vehicle.

Approved For Filing: 4/14/2017 3:50:30 PM Page 44 of 58

- 3. Accidental bodily injury sustained by a relative of the owner residing in the same household, under the circumstances described in subparagraph 1. or subparagraph 2., if the relative at the time of the accident is domiciled in the owner's household and is not the owner of a motor vehicle with respect to which security is required under ss. 627.732-627.737, 627.7403, and 627.7405 627.730-627.7405.
- 4. Accidental bodily injury sustained in this state by any other person while occupying the owner's motor vehicle or, if a resident of this state, while not an occupant of a self-propelled vehicle if the injury is caused by physical contact with such motor vehicle, if the injured person is not:
- a. The owner of a motor vehicle with respect to which security is required under ss.  $\underline{627.732-627.737}$ ,  $\underline{627.7403}$ , and  $\underline{627.7405}$   $\underline{627.730-627.7405}$ ; or
- b. Entitled to personal injury benefits from the insurer of the owner of such a motor vehicle.
- (f) If two or more insurers are liable for paying personal injury protection benefits for the same injury to any one person, the maximum payable is as specified in subsection (1), and the insurer paying the benefits is entitled to recover from each of the other insurers an equitable pro rata share of the benefits paid and expenses incurred in processing the claim.
- (g) It is a violation of the insurance code for an insurer to fail to timely provide benefits as required by this section

Approved For Filing: 4/14/2017 3:50:30 PM Page 45 of 58

with such frequency as to constitute a general business 1115 practice.

- (h) Benefits are not due or payable to or on the behalf of an insured person if that person has committed, by a material act or omission, insurance fraud relating to personal injury protection coverage under his or her policy, if the fraud is admitted to in a sworn statement by the insured or established in a court of competent jurisdiction. Any insurance fraud voids all coverage arising from the claim related to such fraud under the personal injury protection coverage of the insured person who committed the fraud, irrespective of whether a portion of the insured person's claim may be legitimate, and any benefits paid before the discovery of the fraud is recoverable by the insurer in its entirety from the person who committed insurance fraud. The prevailing party is entitled to its costs and attorney fees in any action in which it prevails in an insurer's action to enforce its right of recovery under this paragraph.
- (i) If an insurer has a reasonable belief that a fraudulent insurance act, for the purposes of s. 626.989 or s. 817.234, has been committed, the insurer shall notify the claimant, in writing, within 30 days after submission of the claim that the claim is being investigated for suspected fraud. Beginning at the end of the initial 30-day period, the insurer has an additional 60 days to conduct its fraud investigation. Notwithstanding subsection (10), no later than 90 days after the

Approved For Filing: 4/14/2017 3:50:30 PM Page 46 of 58

submission of the claim, the insurer must deny the claim or pay the claim with simple interest as provided in paragraph (d). Interest shall be assessed from the day the claim was submitted until the day the claim is paid. All claims denied for suspected fraudulent insurance acts shall be reported to the Division of Investigative and Forensic Services.

- (j) An insurer shall create and maintain for each insured a log of personal injury protection benefits paid by the insurer on behalf of the insured. If litigation is commenced, the insurer shall provide to the insured a copy of the log within 30 days after receiving a request for the log from the insured.
  - (5) CHARGES FOR TREATMENT OF INJURED PERSONS.-
- (c) With respect to any treatment or service, other than medical services billed by a hospital or other provider for emergency services and care as defined in s. 395.002 or inpatient services rendered at a hospital-owned facility, the statement of charges must be furnished to the insurer by the provider and may not include, and the insurer is not required to pay, charges for treatment or services rendered more than 35 days before the postmark date or electronic transmission date of the statement, except for past due amounts previously billed on a timely basis under this paragraph, and except that, if the provider submits to the insurer a notice of initiation of treatment within 21 days after its first examination or treatment of the claimant, the statement may include charges for

Approved For Filing: 4/14/2017 3:50:30 PM Page 47 of 58

 treatment or services rendered up to, but not more than, 75 days before the postmark date of the statement. The injured party is not liable for, and the provider may not bill the injured party for, charges that are unpaid because of the provider's failure to comply with this paragraph. Any agreement requiring the injured person or insured to pay for such charges is unenforceable.

- 1. If the insured fails to furnish the provider with the correct name and address of the insured's personal injury protection insurer, the provider has 35 days from the date the provider obtains the correct information to furnish the insurer with a statement of the charges. The insurer is not required to pay for such charges unless the provider includes with the statement documentary evidence that was provided by the insured during the 35-day period demonstrating that the provider reasonably relied on erroneous information from the insured and either:
  - a. A denial letter from the incorrect insurer; or
- b. Proof of mailing, which may include an affidavit under penalty of perjury, reflecting timely mailing to the incorrect address or insurer.
- 2. For emergency services and care rendered in a hospital emergency department or for transport and treatment rendered by an ambulance provider licensed pursuant to part III of chapter 401, the provider is not required to furnish the statement of

Approved For Filing: 4/14/2017 3:50:30 PM Page 48 of 58

charges within the time periods established by this paragraph, and the insurer is not considered to have been furnished with notice of the amount of covered loss for purposes of paragraph (4)(b) until it receives a statement complying with paragraph (d), or copy thereof, which specifically identifies the place of service to be a hospital emergency department or an ambulance in accordance with billing standards recognized by the federal Centers for Medicare and Medicaid Services.

- 3. Each notice of the insured's rights under s. 627.7401 must include the following statement in at least 12-point type: BILLING REQUIREMENTS.—Florida law provides that with respect to any treatment or services, other than certain hospital and emergency services, the statement of charges furnished to the insurer by the provider may not include, and the insurer and the injured party are not required to pay, charges for treatment or services rendered more than 35 days before the postmark date of the statement, except for past due amounts previously billed on a timely basis, and except that, if the provider submits to the insurer a notice of initiation of treatment within 21 days after its first examination or treatment of the claimant, the statement may include charges for treatment or services rendered up to, but not more than, 75 days before the postmark date of the statement.
- (h) As provided in s. 400.9905, an entity excluded from the definition of a clinic shall be deemed a clinic and must be

Page 49 of 58

Approved For Filing: 4/14/2017 3:50:30 PM

L214	licensed under part X of chapter 400 in order to receive
L215	reimbursement under ss. 627.732-627.737, 627.7403, and 627.7405
L216	627.730-627.7405. However, this licensing requirement does not
L217	apply to:

- 1. An entity wholly owned by a physician licensed under chapter 458 or chapter 459, or by the physician and the spouse, parent, child, or sibling of the physician;
- 2. An entity wholly owned by a dentist licensed under chapter 466, or by the dentist and the spouse, parent, child, or sibling of the dentist;
- 3. An entity wholly owned by a chiropractic physician licensed under chapter 460, or by the chiropractic physician and the spouse, parent, child, or sibling of the chiropractic physician;
- 4. A hospital or ambulatory surgical center licensed under chapter 395;
- 5. An entity that wholly owns or is wholly owned, directly or indirectly, by a hospital or hospitals licensed under chapter 395;
- 6. An entity that is a clinical facility affiliated with an accredited medical school at which training is provided for medical students, residents, or fellows;
- 7. An entity that is certified under 42 C.F.R. part 485, subpart H; or
- 8. An entity that is owned by a publicly traded

Approved For Filing: 4/14/2017 3:50:30 PM Page 50 of 58

corporation, either directly or indirectly through its subsidiaries, that has \$250 million or more in total annual sales of health care services provided by licensed health care practitioners if one or more of the persons responsible for the operations of the entity are health care practitioners who are licensed in this state and who are responsible for supervising the business activities of the entity and the entity's compliance with state law for purposes of this section.

- (6) DISCOVERY OF FACTS ABOUT AN INJURED PERSON; DISPUTES.-
- (a) If a request is made by an insurer providing personal injury protection benefits under ss. 627.732-627.737, 627.7403, and 627.7405 627.730-627.7405 against whom a claim has been made, an employer must furnish, in a form approved by the office, a sworn statement of the earnings, since the time of the bodily injury and for a reasonable period before the injury, of the person upon whose injury the claim is based.
- (g) An insured seeking benefits under ss. 627.732-627.737, 627.7403, and 627.7405 627.730-627.7405, including an omnibus insured, must comply with the terms of the policy, which include, but are not limited to, submitting to an examination under oath. The scope of questioning during the examination under oath is limited to relevant information or information that could reasonably be expected to lead to relevant information. Compliance with this paragraph is a condition precedent to receiving benefits. An insurer that, as a general

Approved For Filing: 4/14/2017 3:50:30 PM Page 51 of 58

business practice as determined by the office, requests an examination under oath of an insured or an omnibus insured without a reasonable basis is subject to s. 626.9541.

- (8) APPLICABILITY OF PROVISION REGULATING ATTORNEY FEES.— With respect to any dispute under the provisions of ss. 627.732-627.737, 627.7403, and 627.7405 627.730-627.7405 between the insured and the insurer, or between an assignee of an insured's rights and the insurer, the provisions of ss. 627.428 and 768.79 apply, except as provided in subsections (10) and (15), and except that any attorney fees recovered must:
  - (a) Comply with prevailing professional standards;
- (b) Not overstate or inflate the number of hours reasonably necessary for a case of comparable skill or complexity; and
- (c) Represent legal services that are reasonable and necessary to achieve the result obtained.

Upon request by either party, a judge must make written findings, substantiated by evidence presented at trial or any hearings associated therewith, that any award of attorney fees complies with this subsection. Notwithstanding s. 627.428, attorney fees recovered under ss. 627.732-627.737, 627.7403, and 627.7405 627.730-627.7405 must be calculated without regard to a contingency risk multiplier.

(16) SECURE ELECTRONIC DATA TRANSFER.—A notice,

Approved For Filing: 4/14/2017 3:50:30 PM Page 52 of 58

L289	documentation, transmission, or communication of any kind
L290	required or authorized under ss. $\underline{627.732-627.737}$ , $\underline{627.7403}$ , and
L291	$\underline{627.7405}$ $\underline{627.730-627.7405}$ may be transmitted electronically if
L292	it is transmitted by secure electronic data transfer that is
L293	consistent with state and federal privacy and security laws.
L294	Section 29. <u>Sections 627.730, 627.731, 627.7311, 627.739,</u>
L295	and 627.7401, Florida Statutes, of the "Florida Motor Vehicle
L296	No-Fault Law," are repealed.
L297	Section 30. Section 627.7407, Florida Statutes, is
L298	repealed.
L299	Section 31. Notwithstanding any other provision of law,
L300	sections 627.732, 627.733, 627.734, 627.736, 627.737, 627.7403,
L301	and 627.7405, Florida Statutes, only apply to policies issued
L302	under the "Florida Motor Vehicle No-Fault Law" that are in force
L303	on or before December 31, 2017.
L304	Section 32. Section 627.8405, Florida Statutes, is amended
L305	to read:
L306	627.8405 Prohibited acts; financing companies.— $\underline{A}$ No
L307	premium finance company shall, in a premium finance agreement or
L308	other agreement, $\underline{\text{may not}}$ finance the cost of or otherwise
L309	provide for the collection or remittance of dues, assessments,
L310	fees, or other periodic payments of money for the cost of:
L311	(1) A membership in an automobile club. The term
L312	"automobile club" means a legal entity that which, in
L313	consideration of dues, assessments, or periodic payments of

| 561239

Approved For Filing: 4/14/2017 3:50:30 PM Page 53 of 58

money, promises its members or subscribers to assist them in
matters relating to the ownership, operation, use, or
maintenance of a motor vehicle; however, $\underline{\text{the term}}$ $\underline{\text{this}}$
definition of "automobile club" does not include persons,
associations, or corporations which are organized and operated
solely for the purpose of conducting, sponsoring, or sanctioning
motor vehicle races, exhibitions, or contests upon racetracks,
or upon racecourses established and marked as such for the
duration of such particular events. The $\underline{\text{term}}$ $\underline{\text{words}}$ "motor
vehicle" used herein have the same meaning as defined in chapter
320.

- (2) An accidental death and dismemberment policy sold in combination with a policy providing only bodily injury liability coverage personal injury protection and property damage liability coverage only policy.
- (3) Any product not regulated under the provisions of this insurance code.

This section also applies to premium financing by any insurance agent or insurance company under part XVI. The commission shall adopt rules to assure disclosure, at the time of sale, of <a href="motor-vehicle liability insurance">work of motor vehicle liability insurance</a> coverages financed <a href="with personal-injury protection">with personal injury protection</a> and shall prescribe the form of such disclosure.

Section 33. Subsection (1) of section 627.915, Florida 561239

Approved For Filing: 4/14/2017 3:50:30 PM Page 54 of 58

1340

1341

1342

1343

1344

1345

1346

1347

13481349

1350

1351

1352

1353

1354

1355

1356

1357

1358

1359

1360

1361

13621363

1339 Statutes, is amended to read:

627.915 Insurer experience reporting.-

- Each insurer transacting private passenger automobile insurance in this state shall report certain information annually to the office. The information will be due on or before July 1 of each year. The information shall be divided into the following categories: bodily injury liability; property damage liability; uninsured motorist; personal injury protection benefits; medical payments; and comprehensive and collision. The information given must shall be on direct insurance writings in the state alone and must shall represent total limits data. The information set forth in paragraphs (a)-(f) is applicable to voluntary private passenger and Joint Underwriting Association private passenger writings and shall be reported for each of the latest 3 calendar-accident years, with an evaluation date of March 31 of the current year. The information set forth in paragraphs (g)-(j) is applicable to voluntary private passenger writings and shall be reported on a calendar-accident year basis ultimately seven times at seven different stages of development.
- (a) Premiums earned for the latest 3 calendar-accident years.
- (b) Loss development factors and the historic development of those factors.
  - (c) Policyholder dividends incurred.
  - (d) Expenses for other acquisition and general expense.

561239

Approved For Filing: 4/14/2017 3:50:30 PM Page 55 of 58

1364	(e) Expenses for agents' commissions and taxes, licenses,
1365	and fees.
1366	(f) Profit and contingency factors as utilized in the
1367	insurer's automobile rate filings for the applicable years.
1368	(g) Losses paid.
1369	(h) Losses unpaid.
1370	(i) Loss adjustment expenses paid.
1371	(j) Loss adjustment expenses unpaid.
1372	Section 34. Subsections (2) and (3) of section 628.909,
1373	Florida Statutes, are amended to read:
1374	628.909 Applicability of other laws.—
1375	(2) The following provisions of the Florida Insurance Code
1376	apply to captive insurance companies who are not industrial
1377	insured captive insurance companies to the extent that such
1378	provisions are not inconsistent with this part:
1379	(a) Chapter 624, except for ss. 624.407, 624.408,
1380	624.4085, 624.40851, 624.4095, 624.411, 624.425, and 624.426.
1381	(b) Chapter 625, part II.
1382	(c) Chapter 626, part IX.
1383	(d) Sections 627.730-627.7405, when no-fault coverage is
1384	<del>provided.</del>
1385	(d) (e) Chapter 628.
1386	(3) The following provisions of the Florida Insurance Code
1387	shall apply to industrial insured captive insurance companies to
1388	the extent that such provisions are not inconsistent with this

561239

Approved For Filing: 4/14/2017 3:50:30 PM Page 56 of 58

1389	part:
1390	(a) Chapter 624, except for ss. 624.407, 624.408,
1391	624.4085, 624.40851, 624.4095, 624.411, 624.425, 624.426, and
1392	624.609(1).
1393	(b) Chapter 625, part II, if the industrial insured
1394	captive insurance company is incorporated in this state.
1395	(c) Chapter 626, part IX.
1396	(d) Sections 627.730-627.7405 when no-fault coverage is
1397	<del>provided.</del>
1398	(d) (e) Chapter 628, except for ss. 628.341, 628.351, and
1399	628.6018.
1400	Section 35. Subsections (2) and (3) of section 628.909,
1401	Florida Statutes, are amended to read:
1402	628.909 Applicability of other laws.—
1403	(2) The following provisions of the Florida Insurance Code
1404	apply to captive insurance companies who are not industrial
1405	insured captive insurance companies to the extent that such
1406	provisions are not inconsistent with this part:
1407	(a) Chapter 624, except for ss. 624.407, 624.408,
1408	624.4085, 624.40851, 624.4095, 624.411, 624.425, and 624.426.
1409	(b) Chapter 625, part II.
1410	(c) Chapter 626, part IX.
1411	(d) Sections 627.730-627.7405, when no-fault coverage is
1412	<del>provided.</del>
1413	<u>(d) <del>(e)</del></u> Chapter 628.

561239

Approved For Filing: 4/14/2017 3:50:30 PM

Page 57 of 58

1418

1419 1420

1421

1422

1423

1414	(3) The following provisions of the Florida Insurance Code
1415	shall apply to industrial insured captive insurance companies to
1416	the extent that such provisions are not inconsistent with this
1417	part:

- (a) Chapter 624, except for ss. 624.407, 624.408, 624.4085, 624.40851, 624.4095, 624.411, 624.425, 624.426, and 624.609(1).
- (b) Chapter 625, part II, if the industrial insured captive insurance company is incorporated in this state.
  - (c) Chapter 626, part IX.
- 1424 (d) Sections 627.730-627.7405 when no-fault coverage is provided.
- 1426 (d) (e) Chapter 628, except for ss. 628.341, 628.351, and 1427 628.6018.
- Section 36. Except as otherwise expressly provided in this act, this act shall take effect July 1, 2018.

561239