

	LEGISLATIVE ACTION	
Senate	•	House
Comm: FAV	•	
02/12/2020	•	
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The Committee on Banking and Insurance (Brandes) recommended the following:

Senate Amendment (with title amendment)

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Delete everything after the enacting clause and insert:

Section 1. Paragraph (c) of subsection (2) of section 215.555, Florida Statutes, is amended to read:

- 215.555 Florida Hurricane Catastrophe Fund.-
- (2) DEFINITIONS.—As used in this section:
- (c) "Covered policy" means any insurance policy covering residential property in this state, including, but not limited

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to, any homeowner, mobile home owner, farm owner, condominium association, condominium unit owner, tenant, or apartment building policy, or any other policy covering a residential structure or its contents issued by any authorized insurer, including a commercial self-insurance fund holding a certificate of authority issued by the Office of Insurance Regulation under s. 624.462, the Citizens Property Insurance Corporation, and any joint underwriting association or similar entity created under law. The term "covered policy" includes any collateral protection insurance policy covering personal residences which protects both the borrower's and the lender's financial interests, in an amount at least equal to the coverage amount for the dwelling in place under the lapsed homeowner's policy, the most recent total market value of the dwelling as determined by the county property appraiser, or the coverage amount the homeowner requests from the insurer, if such collateral protection insurance policy can be accurately reported as required in subsection (5). Additionally, covered policies include policies covering the peril of wind removed from the Florida Residential Property and Casualty Joint Underwriting Association or from the Citizens Property Insurance Corporation, created under s. 627.351(6), or from the Florida Windstorm Underwriting Association, created under s. 627.351(2), by an authorized insurer under the terms and conditions of an executed assumption agreement between the authorized insurer and such association or Citizens Property Insurance Corporation. Each assumption agreement between the association and such authorized insurer or Citizens Property Insurance Corporation must be approved by the Office of Insurance Regulation before the

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effective date of the assumption, and the Office of Insurance Regulation must provide written notification to the board within 15 working days after such approval. "Covered policy" does not include any policy that excludes wind coverage or hurricane coverage or any reinsurance agreement and does not include any policy otherwise meeting this definition which is issued by a surplus lines insurer or a reinsurer. All commercial residential excess policies and all deductible buy-back policies that, based on sound actuarial principles, require individual ratemaking shall be excluded by rule if the actuarial soundness of the fund is not jeopardized. For this purpose, the term "excess policy" means a policy that provides insurance protection for large commercial property risks and that provides a layer of coverage above a primary layer insured by another insurer.

Section 2. Effective upon this act becoming a law, paragraph (d) of subsection (3) of section 319.30, Florida Statutes, is amended to read:

319.30 Definitions; dismantling, destruction, change of identity of motor vehicle or mobile home; salvage.-

(3)

(d) An electronic signature that is consistent with chapter 668 satisfies any signature required under this subsection, except that an electronic signature on an odometer disclosure submitted through an insurance company must be executed using an electronic signature, as defined in s. 668.003(4), which that uses a system providing an Identity Assurance Level, Authenticator Assurance Level, and Federation Assurance Level, as described in the National Institute of Standards and Technology Special Publication 800-63-3, as of December 1, 2017,

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which that are equivalent to or greater than:

1. Level 2, for each level, for a certificate of destruction or-

2. Level 3, for each level, for a salvage certificate of title.

Section 3. Paragraph (a) of subsection (1) of section 440.12, Florida Statutes, is amended to read:

440.12 Time for commencement and limits on weekly rate of compensation. -

- (1) Compensation is not allowed for the first 7 days of the disability, except for benefits provided under s. 440.13. However, if the injury results in more than 21 days of disability, compensation is allowed from the commencement of the disability.
- (a) All weekly compensation payments, except for the first payment, must be paid by check or, if authorized by the employee, paid on a prepaid card pursuant to paragraph (b), or deposited directly into the employee's account at a financial institution as defined in s. 655.005, or transmitted to the employee's account with a money transmitter licensed under part II of chapter 560.

Section 4. Paragraph (a) of subsection (1) and paragraph (a) of subsection (6) of section 440.20, Florida Statutes, are amended to read:

440.20 Time for payment of compensation and medical bills; penalties for late payment.-

(1) (a) Unless the carrier denies compensability or entitlement to benefits, the carrier shall pay compensation directly to the employee as required by ss. 440.14, 440.15, and

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440.16, in accordance with those sections. Upon receipt of the employee's authorization as provided for in s. 440.12(1)(a), the carrier's obligation to pay compensation directly to the employee is satisfied when the carrier directly deposits, by electronic transfer or other means, compensation into the employee's account at a financial institution as defined in s. 655.005 or onto a prepaid card in accordance with s. 440.12(1) or transmits the employee's compensation to the employee's account with a money transmitter licensed under part II of chapter 560. Compensation by direct deposit, or through the use of a prepaid card, or through transmission is considered paid on the date the funds become available for withdrawal by the employee.

(6)(a) If any installment of compensation for death or dependency benefits, or compensation for disability benefits payable without an award is not paid within 7 days after it becomes due, as provided in subsection (2), subsection (3), or subsection (4), there shall be added to such unpaid installment a penalty of an amount equal to 20 percent of the unpaid installment, which shall be paid at the same time as, but in addition to, such installment of compensation. This penalty shall not apply for late payments resulting from conditions over which the employer or carrier had no control. When any installment of compensation payable without an award has not been paid within 7 days after it became due and the claimant concludes the prosecution of the claim before a judge of compensation claims without having specifically claimed additional compensation in the nature of a penalty under this section, the claimant will be deemed to have acknowledged that,

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owing to conditions over which the employer or carrier had no control, such installment could not be paid within the period prescribed for payment and to have waived the right to claim such penalty. However, during the course of a hearing, the judge of compensation claims shall on her or his own motion raise the question of whether such penalty should be awarded or excused. The department may assess without a hearing the penalty against either the employer or the carrier, depending upon who was at fault in causing the delay. The insurance policy cannot provide that this sum will be paid by the carrier if the department or the judge of compensation claims determines that the penalty should be paid by the employer rather than the carrier. Any additional installment of compensation paid by the carrier pursuant to this section shall be paid directly to the employee by check or, if authorized by the employee, by direct deposit into the employee's account at a financial institution or by transmission to the employee's account with a money transmitter licensed under part II of chapter 560.

Section 5. Subsection (3) of section 624.155, Florida Statutes, is amended to read:

624.155 Civil remedy.-

- (3) (a) As a condition precedent to bringing an action under this section, the department and the authorized insurer must have been given 60 days' written notice of the violation. Notice to the authorized insurer must be provided by the department to the e-mail address designated by the insurer under s. 624.422.
- (b) The notice shall be on a form provided by the department and shall state with specificity the following information, and such other information as the department may



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- 1. The statutory provision, including the specific language of the statute, which the authorized insurer allegedly violated.
- 2. The facts and circumstances giving rise to the violation.
 - 3. The name of any individual involved in the violation.
- 4. Reference to specific policy language that is relevant to the violation, if any. If the person bringing the civil action is a third party claimant, she or he shall not be required to reference the specific policy language if the authorized insurer has not provided a copy of the policy to the third party claimant pursuant to written request.
- 5. A statement that the notice is given in order to perfect the right to pursue the civil remedy authorized by this section.
- (c) No action shall lie if, within 60 days after the insurer receives filing notice from the department in accordance with this subsection, the damages are paid or the circumstances giving rise to the violation are corrected.
- (d) The authorized insurer that is the recipient of a notice filed pursuant to this section shall report to the department on the disposition of the alleged violation.
- (e) The applicable statute of limitations for an action under this section shall be tolled for a period of:
- 1. Sixty 65 days after the insurer receives from the department by the mailing of the notice required by this subsection.
- 2. Sixty days after the date appraisal is invoked pursuant to paragraph (f) or the mailing of a subsequent notice required by this subsection.

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(f) A notice required under this subsection may not be filed within 60 days after appraisal is invoked by any party in a residential property insurance claim.

Section 6. Subsection (4) of section 624.307, Florida Statutes, is amended, and subsection (11) is added to that section, to read:

624.307 General powers; duties.-

- (4) The department and office may each collect, propose, publish, and disseminate information relating to the subject matter of any duties imposed upon it by law. Aggregate information may include information asserted as trade secret information unless the trade secret information can be individually extrapolated, in which case the trade secret information remains protected as provided under s. 624.4213.
- (11) The Commissioner of Insurance Regulation may not lobby for compensation the Legislature, the Governor, the Executive Office of the Governor, members of the Cabinet, a department that is headed by a member of the Cabinet, or the office on issues of policy, appropriations, or procurement for a period of 6 years after vacation of public position.

Section 7. Subsection (4) is added to section 624.315, Florida Statutes, to read:

624.315 Department; annual report.

(4) When aggregate information includes information asserted as trade secret information, the office may include the trade secret information in the report required under subsection (1) or may make the trade secret information available under subsection (2) unless the trade secret information can be individually extrapolated, in which case the trade secret



214 information remains protected as provided under s. 624.4213. Section 8. Subsection (2) of section 624.422, Florida 215 216 Statutes, is amended to read: 624.422 Service of process; appointment of Chief Financial 217 218 Officer as process agent.-219 (2) Prior to its authorization to transact insurance in 220 this state, each insurer shall file with the department 221 designation of the name and address of the person to whom 222 process against it served upon the Chief Financial Officer is to 223 be forwarded. Each insurer shall also file with the department 224 designation of the name, mailing address, and e-mail address of 225 the person who shall receive presuit notices filed under s. 226 627.7152 and the name and e-mail address of the person to whom 227 the department shall forward civil remedy notices filed under 228 624.155. The department shall publish such names and addresses 229 on its website. The insurer may change a the designation at any 230 time by a new filing. Section 9. Paragraph (c) of subsection (1) of section 231 626.321, Florida Statutes, is amended to read: 232 233 626.321 Limited licenses and registration.-234 (1) The department shall issue to a qualified applicant a 235 license as agent authorized to transact a limited class of 236 business in any of the following categories of limited lines 237 insurance: 238 (c) Travel insurance.—License covering only policies and 239 certificates of travel insurance which are subject to review by 240 the office. Policies and certificates of travel insurance may

provide coverage for travel insurance, as defined in s. 647.02 risks incidental to travel, planned travel, or accommodations

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while traveling, including, but not limited to, accidental death and dismemberment of a traveler; trip or event cancellation, interruption, or delay; loss of or damage to personal effects or travel documents; damages to travel accommodations; baggage delay; emergency medical travel or evacuation of a traveler; or medical, surgical, and hospital expenses related to an illness or emergency of a traveler. Such policy or certificate may be issued for terms longer than 90 days, but, other than a policy or certificate providing coverage for air ambulatory services only, each policy or certificate must be limited to coverage for travel or use of accommodations of no longer than 90 days. The license may be issued only to an individual or business entity that has filed with the department an application for a license in a form and manner prescribed by the department.

- 1. A limited lines travel insurance producer, as defined in s. 647.02, shall be licensed to sell, solicit, or negotiate travel insurance through a licensed insurer.
- 2. A person may not act as a limited lines travel insurance producer or travel retailer unless properly licensed or registered, respectively. As used in this paragraph, the term "travel retailer" means a business entity that:
 - a. Makes, arranges, or offers planned travel.
- b. May, under subparagraph 3., offer and disseminate travel insurance as a service to its customers on behalf of and under the direction of a limited lines travel insurance producer.
- 3. A travel retailer may offer and disseminate travel insurance under a limited lines travel insurance producer business entity license only if all of the following requirements are met:



- 272 a. The limited lines travel insurance producer or travel 273 retailer provides to purchasers of travel insurance: 274 (I) A description of the material terms or the actual 275 material terms of the insurance coverage. 276 (II) A description of the process for filing a claim. 277 (III) A description of the review or cancellation process 278 for the travel insurance policy. 279 (IV) The identity and contact information of the insurer 280 and limited lines travel insurance producer. 281 b. At the time of licensure, the limited lines travel 282 insurance producer establishes and maintains a register on the 283 department's website and appoints each travel retailer that 284 offers travel insurance on behalf of the limited lines travel 285 insurance producer. The limited lines travel insurance producer 286 must maintain and update the register, which must include the 287 travel retailer's federal tax identification number and the 288 name, address, and contact information of the travel retailer 289 and an officer or person who directs or controls the travel 290 retailer's operations. The limited lines travel insurance 291 producer shall submit the register to the department upon 292 reasonable request. The limited lines travel insurance producer 293 shall also certify that the travel retailer register complies with 18 U.S.C. s. 1033. The grounds for the suspension and 294 revocation and the penalties applicable to resident insurance 295 296 producers under this section apply to the limited lines travel 297 insurance producers and travel retailers. 298 c. The limited lines travel insurance producer has 299 designated one of its employees as the designated responsible
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producer. The designated responsible producer, who must be a

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licensed insurance producer, is responsible for compliance with the travel insurance laws and regulations applicable to the limited lines travel insurance producer and its registrants. The designated responsible producer and the president, secretary, treasurer, and any other officer or person who directs or controls the limited lines travel insurance producer's insurance operations must comply with the fingerprinting requirements applicable to insurance producers in the resident state of the limited lines travel insurance producer.

- d. The limited lines travel insurance producer has paid all applicable licensing and appointment fees, as set forth in applicable general law.
- e. The limited lines travel insurance producer requires each employee and each authorized representative of the travel retailer whose duties include offering and disseminating travel insurance to receive a program of instruction or training, which is subject, at the discretion of the department, to review and approval. The training material must, at a minimum, contain adequate instructions on the types of insurance offered, ethical sales practices, and required disclosures to prospective purchasers.

As used in this paragraph, the term "offer and disseminate" means to provide general information, including a description of the coverage and price, as well as processing the application and collecting premiums.

4. A travel retailer offering or disseminating travel insurance shall make available to prospective purchasers brochures or other written materials that have been approved by



the travel insurer. Such materials must include information 330 331 that, at a minimum: 332 a. Provides the identity and contact information of the 333 insurer and the limited lines travel insurance producer. 334 b. Explains that the purchase of travel insurance is not 335 required in order to purchase any other product or service from 336 the travel retailer. 337 c. Explains that a travel retailer is authorized to provide 338 only general information about the insurance offered by the 339 travel retailer, including a description of the coverage and 340 price, but is not qualified or authorized to answer technical 341 questions about the terms and conditions of the insurance 342 offered by the travel retailer or to evaluate the adequacy of 343 the customer's existing insurance coverage. 344 5. A travel retailer employee or authorized representative who is not licensed as an insurance producer may not: 345 346 a. Evaluate or interpret the technical terms, benefits, and 347 conditions of the offered travel insurance coverage; 348 b. Evaluate or provide advice concerning a prospective 349 purchaser's existing insurance coverage; or 350 c. Hold himself or herself or the travel retailer out as a licensed insurer, licensed producer, or insurance expert. 351 352 353 Notwithstanding any other law, a travel retailer whose 354 insurance-related activities, and those of its employees and 355 authorized representatives, are limited to offering and 356 disseminating travel insurance on behalf of and under the 357 direction of a limited lines travel insurance producer meeting

the conditions in this section may receive related compensation

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upon registration by the limited lines travel insurance producer as described in paragraph (2)(b).

- 6. As the insurer's designee, the limited lines travel insurance producer is responsible for the acts of the travel retailer and shall use reasonable means to ensure compliance by the travel retailer with this section.
- 7. Any person licensed as a general or personal lines agent may sell, solicit, and negotiate travel insurance. ÷
- 1. To a full-time salaried employee of a common carrier or a full-time salaried employee or owner of a transportation ticket agency and may authorize the sale of such ticket policies only in connection with the sale of transportation tickets, or to the full-time salaried employee of such an agent. Such policy may not be for more than 48 hours or more than the duration of a specified one-way trip or round trip.
 - 2. To an entity or individual that is:
- a. The developer of a timeshare plan that is the subject of an approved public offering statement under chapter 721;
- b. An exchange company operating an exchange program approved under chapter 721;
- c. A managing entity operating a timeshare plan approved under chapter 721;
 - d. A seller of travel as defined in chapter 559; or
- e. A subsidiary or affiliate of any of the entities described in sub-subparagraphs a.-d.
- 3. To a full-time salaried employee of a licensed general lines agent or a business entity that offers travel planning services if insurance sales activities authorized by the license are in connection with, and incidental to, travel.

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a. A license issued to a business entity that offers travel planning services must encompass each office, branch office, or place of business making use of the entity's business name in order to offer, solicit, and sell insurance pursuant to this paragraph.

b. The application for licensure must list the name, address, and phone number for each office, branch office, or place of business that is to be covered by the license. The licensee shall notify the department of the name, address, and phone number of any new location that is to be covered by the license before the new office, branch office, or place of business engages in the sale of insurance pursuant to this paragraph. The licensee shall notify the department within 30 days after the closing or terminating of an office, branch office, or place of business. Upon receipt of the notice, the department shall delete the office, branch office, or place of business from the license.

c. A licensed and appointed entity is directly responsible and accountable for all acts of the licensee's employees and parties with whom the licensee has entered into a contractual agreement to offer travel insurance.

A licensee shall require each individual who offers policies or certificates under subparagraph 2. or subparagraph 3. to receive initial training from a general lines agent or an insurer authorized under chapter 624 to transact insurance within this state. For an entity applying for a license as a travel insurance agent, the fingerprinting requirement of this section applies only to the president, secretary, and treasurer and to

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any other officer or person who directs or controls the travel insurance operations of the entity.

Section 10. Subsection (13) of section 626.854, Florida Statutes, is amended to read:

626.854 "Public adjuster" defined; prohibitions.—The Legislature finds that it is necessary for the protection of the public to regulate public insurance adjusters and to prevent the unauthorized practice of law.

- (13) A company employee adjuster, independent adjuster, attorney, investigator, or other persons acting on behalf of an insurer that needs access to an insured or claimant or to the insured property that is the subject of a claim must provide at least 48 hours' notice to:
- (a) The insured or claimant, public adjuster, or legal representative before scheduling a meeting with the claimant.
- (b) The insured or claimant before scheduling or an onsite inspection of the insured property. During the inspection, an attempt may not be made to conduct an unscheduled meeting with the insured or claimant. The insured or claimant may deny access to the property if the notice has not been provided. The insured or claimant may waive the 48-hour notice.

Section 11. Section 626.931, Florida Statutes, is amended to read:

- 626.931 Agent affidavit and Insurer reporting requirements.-
- (1) Each surplus lines agent that has transacted business during a calendar quarter shall on or before the 45th day following the calendar quarter file with the Florida Surplus Lines Service Office an affidavit, on forms as prescribed and

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furnished by the Florida Surplus Lines Service Office, stating that all surplus lines insurance transacted by him or her during such calendar quarter has been submitted to the Florida Surplus Lines Service Office as required.

- (2) The affidavit of the surplus lines agent shall include efforts made to place coverages with authorized insurers and the results thereof.
- (3) Each foreign insurer accepting premiums shall, on or before the end of the month following each calendar quarter, file with the Florida Surplus Lines Service Office a verified report of all surplus lines insurance transacted by such insurer for insurance risks located in this state during such calendar quarter.
- (2) (4) Each alien insurer accepting premiums shall, on or before June 30 of each year, file with the Florida Surplus Lines Service Office a verified report of all surplus lines insurance transacted by such insurer for insurance risks located in this state during the preceding calendar year.
- (3) The department may waive the filing requirements described in subsections (1) $\frac{(3)}{(4)}$ and (2) $\frac{(4)}{(4)}$.
- (4) (6) Each insurer's report and supporting information shall be in a computer-readable format as determined by the Florida Surplus Lines Service Office or shall be submitted on forms prescribed by the Florida Surplus Lines Service Office and shall show for each applicable agent:
- (a) A listing of all policies, certificates, cover notes, or other forms of confirmation of insurance coverage or any substitutions thereof or endorsements thereto and the identifying number; and

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(b) Any additional information required by the department or Florida Surplus Lines Service Office.

Section 12. Paragraph (a) of subsection (2) of section 626.932, Florida Statutes, is amended to read:

626.932 Surplus lines tax.-

(2)(a) The surplus lines agent shall make payable to the department the tax related to each calendar quarter's business as reported to the Florida Surplus Lines Service Office, and remit the tax to the Florida Surplus Lines Service Office at the same time as the fee payment required provided for the filing of the quarterly affidavit, under s. 626.9325 s. 626.931. The Florida Surplus Lines Service Office shall forward to the department the taxes and any interest collected pursuant to paragraph (b), within 10 days of receipt.

Section 13. Paragraph (d) of subsection (1) of section 626.935, Florida Statutes, is amended to read:

626.935 Suspension, revocation, or refusal of surplus lines agent's license.-

- (1) The department shall deny an application for, suspend, revoke, or refuse to renew the appointment of a surplus lines agent and all other licenses and appointments held by the licensee under this code, on any of the following grounds:
- (d) Failure to make and file his or her affidavit or reports when due as required by s. 626.931.

Section 14. Paragraphs (a) and (j) of subsection (2) of section 627.062, Florida Statutes, are amended to read:

627.062 Rate standards.-

- (2) As to all such classes of insurance:
- (a) Insurers or rating organizations shall establish and

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use rates, rating schedules, or rating manuals that allow the insurer a reasonable rate of return on the classes of insurance written in this state. A copy of rates, rating schedules, rating manuals, premium credits or discount schedules, and surcharge schedules, and changes thereto, must be filed with the office under one of the following procedures:

- 1. If the filing is made at least 90 days before the proposed effective date and is not implemented during the office's review of the filing and any proceeding and judicial review, such filing is considered a "file and use" filing. In such case, the office shall finalize its review by issuance of a notice of intent to approve or a notice of intent to disapprove within 90 days after receipt of the filing. If the 90-day period ends on a weekend or a holiday under s. 110.117(1)(a)-(i), it must be extended until the conclusion of the next business day. The notice of intent to approve and the notice of intent to disapprove constitute agency action for purposes of the Administrative Procedure Act. Requests for supporting information, requests for mathematical or mechanical corrections, or notification to the insurer by the office of its preliminary findings does not toll the 90-day period during any such proceedings and subsequent judicial review. The rate shall be deemed approved if the office does not issue a notice of intent to approve or a notice of intent to disapprove within 90 days after receipt of the filing.
- 2. If the filing is not made in accordance with subparagraph 1., such filing must be made as soon as practicable, but within 30 days after the effective date, and is considered a "use and file" filing. An insurer making a "use and

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file" filing is potentially subject to an order by the office to return to policyholders those portions of rates found to be excessive, as provided in paragraph (h).

- 3. For all property insurance filings made or submitted after January 25, 2007, but before May 1, 2012, an insurer seeking a rate that is greater than the rate most recently approved by the office shall make a "file and use" filing. For purposes of this subparagraph, motor vehicle collision and comprehensive coverages are not considered property coverages.
- (j) With respect to residential property insurance rate filings:
- 1. The rate filing must account for mitigation measures undertaken by policyholders to reduce hurricane losses.
- 2. The office may not disapprove a rate for homeowners' insurance solely because the rate filing uses a modeling indication that is the weighted or straight average of two or more models currently found to be accurate or reliable pursuant to s. 627.0628.

The provisions of this subsection do not apply to workers' compensation, employer's liability insurance, and motor vehicle insurance.

Section 15. Paragraph (b) of subsection (2) of section 627.0629, Florida Statutes, is amended to read:

627.0629 Residential property insurance; rate filings.-(2)

(b) A rate filing for residential property insurance made more than 150 days after approval by the office of a building code rating factor plan submitted by a statewide rating

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organization may shall include positive and negative rate factors that reflect the manner in which building code enforcement in a particular jurisdiction addresses risk of wind damage. The rate filing shall include variations from standard rate factors on an individual basis based on inspection of a particular structure by a licensed home inspector. If an inspection is requested by the insured, the insurer may require the insured to pay the reasonable cost of the inspection. This paragraph applies to structures constructed or renovated after the implementation of this paragraph.

Section 16. Paragraph (a) of subsection (1) of section 627.0651, Florida Statutes, is amended to read:

- 627.0651 Making and use of rates for motor vehicle insurance.-
- (1) Insurers shall establish and use rates, rating schedules, or rating manuals to allow the insurer a reasonable rate of return on motor vehicle insurance written in this state. A copy of rates, rating schedules, and rating manuals, and changes therein, shall be filed with the office under one of the following procedures:
- (a) If the filing is made at least 60 days before the proposed effective date and the filing is not implemented during the office's review of the filing and any proceeding and judicial review, such filing shall be considered a "file and use" filing. In such case, the office shall initiate proceedings to disapprove the rate and so notify the insurer or shall finalize its review within 60 days after receipt of the filing. If the 60-day period ends on a weekend or a holiday under s. 110.117(1)(a)-(i), it must be extended until the conclusion of

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the next business day. Notification to the insurer by the office of its preliminary findings shall toll the 60-day period during any such proceedings and subsequent judicial review. The rate shall be deemed approved if the office does not issue notice to the insurer of its preliminary findings within 60 days after the filing.

Section 17. Subsection (2) of section 627.410, Florida Statutes, is amended to read:

627.410 Filing, approval of forms.-

(2) Every such filing must be made at least 30 days in advance of any such use or delivery. At the expiration of the 30 days, the form filed will be deemed approved unless prior thereto it has been affirmatively approved or disapproved by order of the office. The approval of such form by the office constitutes a waiver of any unexpired portion of such waiting period. The office may extend the period within which it may affirmatively approve or disapprove such form by up to 15 days by giving notice of such extension before expiration of the initial 30-day period. If the initial 30-day period or the 15day extension period ends on a weekend or a holiday under s. 110.117(1)(a)-(i), the review period must be extended until the conclusion of the next business day. At the expiration of such extended period, and in the absence of prior affirmative approval or disapproval, such form shall be deemed approved.

Section 18. Paragraph (f) is added to subsection (5) of section 627.7011, Florida Statutes, to read:

627.7011 Homeowners' policies; offer of replacement cost coverage and law and ordinance coverage. -

(5) This section does not:

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(f) Prohibit an insurer from offering an HO-3 homeowner's insurance policy or endorsement providing that a loss to a roof older than 10 years which is caused by a covered peril other than a hurricane, tornado, fire, or lightning will be adjusted on the basis of actual cash value unless a total loss to the insured structure occurs. Such policy or endorsement may be offered only if the roof of the insured structure is older than 10 years. A policy or endorsement is deemed to provide replacement cost coverage unless before the issuance of the policy or endorsement, the insured makes a written selection, on a form adopted by commission rule, of such actual cash value coverage by signing the form. The form must fully advise the applicant of the nature of the coverage and the heading of the form must state in 12-point bold type: "You are electing to purchase actual cash value coverage on your roof. If your roof is damaged by a covered peril other than hurricane, tornado, fire, or lightning, or the insured structure is not a total loss, you will only receive the depreciated value of your roof and you may experience significant out-of-pocket costs to repair or replace your roof." The applicant may also make such selection through a recorded statement if, contemporaneously but before the selection of actual cash value coverage, the insurer verbally communicates the contents of the form. Section 19. Section 627.70132, Florida Statutes, is amended to read: 627.70132 Notice of property insurance windstorm or hurricane claim. - An initial claim not caused by the peril of

windstorm or hurricane under an insurance policy that provides

property insurance, as defined in s. 624.604, is barred unless

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initial notice of the claim was given to the insurer in accordance with the terms of the policy within 3 years after the date of loss. Notice of all supplemental claims or reopened claims not caused by the peril of windstorm or hurricane must be made within the later of 3 years after the date of loss or 12 months after the last payment by the insurer on the loss. A claim, supplemental claim, or reopened claim under an insurance policy that provides property insurance, as defined in s. 624.604, for loss or damage caused by the peril of windstorm or hurricane is barred unless notice of the claim, supplemental claim, or reopened claim was given to the insurer in accordance with the terms of the policy within 3 years after the hurricane first made landfall or the windstorm caused the covered damage. This section does not apply to sinkhole loss claims, which are subject to the time limitation under s. 627.706(5). For purposes of this section, the term "supplemental claim" or "reopened claim" means any additional claim for recovery from the insurer for losses from the same hurricane or windstorm which the insurer has previously adjusted pursuant to the initial claim. This section does not affect any applicable limitation on civil actions provided in s. 95.11 for claims, supplemental claims, or reopened claims timely filed under this section.

Section 20. Subsection (2) of section 627.714, Florida Statutes, is amended to read:

- 627.714 Residential condominium unit owner coverage; loss assessment coverage required.-
- (2) The maximum amount of any unit owner's loss assessment coverage that can be assessed for any loss shall be an amount equal to that unit owner's loss assessment coverage limit in

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effect 1 day before the date of the occurrence that gave rise to the loss. Such coverage is applicable to any loss assessment regardless of the date of the assessment by the association. Any changes to the limits of a unit owner's coverage for loss assessments made on or after the day before the date of the occurrence are not applicable to such loss.

Section 21. Notwithstanding the expiration of subsection (4) of section 627.715, Florida Statutes, which occurred on July 1, 2019, that subsection is revived, reenacted, and amended to read:

627.715 Flood insurance.—An authorized insurer may issue an insurance policy, contract, or endorsement providing personal lines residential coverage for the peril of flood or excess coverage for the peril of flood on any structure or the contents of personal property contained therein, subject to this section. This section does not apply to commercial lines residential or commercial lines nonresidential coverage for the peril of flood. An insurer may issue flood insurance policies, contracts, endorsements, or excess coverage on a standard, preferred, customized, flexible, or supplemental basis.

(4) A surplus lines agent may export a contract or endorsement providing flood coverage to an eligible surplus lines insurer without making a diligent effort to seek such coverage from three or more authorized insurers under s. 626.916(1) (a). This subsection expires July 1, 2025 $\frac{2019}{}$, or on the date on which the Commissioner of Insurance Regulation determines in writing that there is an adequate admitted market to provide coverage for the peril of flood consistent with this section, whichever date occurs first. If there are fewer than

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three admitted insurers on the date this subsection expires, the number of declinations necessary to meet the diligent-effort requirement shall be no fewer than the number of authorized insurers providing flood coverage.

Section 22. Paragraph (a) of subsection (9) of section 627.7152, Florida Statutes, is amended to read:

627.7152 Assignment agreements.-

(9) (a) An assignee must provide the named insured, insurer, and the assignor, if not the named insured, with a written notice of intent to initiate litigation before filing suit under the policy. Such notice must be served at least 10 business days before filing suit by electronic or certified mail, return receipt requested, to the name and address or e-mail address designated by the insurer in the policy documents and pursuant to s. 624.422 or electronic delivery at least 10 business days before filing suit, but may not be served before the insurer has made a determination of coverage under s. 627.70131. The notice must specify the damages in dispute, the amount claimed, and a presuit settlement demand. Concurrent with the notice, and as a precondition to filing suit, the assignee must provide the named insured, insurer, and the assignor, if not the named insured, a detailed written invoice or estimate of services, including itemized information on equipment, materials, and supplies; the number of labor hours; and, in the case of work performed, proof that the work has been performed in accordance with accepted industry standards.

Section 23. Subsection (4) of section 627.7295, Florida Statutes, is amended to read:

627.7295 Motor vehicle insurance contracts.-

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(4) The insurer may cancel the policy in accordance with this code except that, notwithstanding s. 627.728, an insurer may not cancel a new policy or binder during the first 30 60 days immediately following the effective date of the policy or binder for nonpayment of premium unless the reason for the cancellation is the issuance of a check for the premium that is dishonored for any reason or any other type of premium payment that was subsequently determined to be rejected or invalid.

Section 24. Present subsection (4) of section 627.914, Florida Statutes, is redesignated as subsection (5), a new subsection (4) is added to that section, and subsections (2) and (3) of that section are amended, to read:

- 627.914 Reports of information by workers' compensation insurers required.-
- (2) (a) Each insurer and self-insurance fund authorized to write a policy of workers' compensation insurance shall report transmit the following information annually on both Florida experience and nationwide experience separately:
 - $1. \frac{(a)}{(a)}$ Payrolls by classification.
 - 2. (b) Manual premiums by classification.
 - 3.(c) Standard premiums by classification.
 - 4. (d) Losses by classification and injury type.
 - 5. + (e) Expenses.

An insurer or self-insurance fund that is placed in receivership pursuant to part I of chapter 631 must continue to report the information required under this paragraph. At the discretion of the receiver, the insurer or self-insurance fund may outsource the reporting of such information to a third-party reporting

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vendor. The office shall approve a modified reporting plan that is limited in terms of data elements.

- (b) A report of the this information required under paragraph (a) shall be filed no later than July 1 of each year. All reports shall be filed in accordance with standard reporting procedures for insurers, which procedures have received approval by the office, and shall contain data for the most recent policy period available. A statistical or rating organization may be used by insurers and self-insurance funds to report the data required by this section. The statistical or rating organization shall report each data element in the aggregate only for insurers and self-insurance funds required to report under this section who elect to have the organization report on their behalf. Such insurers and self-insurance funds shall be named in the report.
- (3) Individual self-insurers as defined in s. 440.02 shall report only Florida data as prescribed in subparagraphs (2) (a) 1.-5. paragraphs (2) (a) - (e) to the office.
- (a) The office shall publish the dates and forms necessary to enable individual self-insurers to comply with this section.
- (b) A statistical or rating organization may be used by individual self-insurers for the purposes of reporting the data required by this section and calculating experience ratings.
- (4) The office may use the information it receives under this section in its adoption of rates and experience ratings modifications.
- Section 25. Subsection (3) of section 628.801, Florida Statutes, is amended to read:
 - 628.801 Insurance holding companies; registration;



regulation.-

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(3) Effective January 1, 2021 2015, pursuant to chapter 624 relating to the examination of insurers, the office may examine any insurer registered under this section and its affiliates, including a managing general agent or holding company, to ascertain the financial condition of the insurer, including the enterprise risk to the insurer by the ultimate controlling party, or by any entity or combination of entities within the insurance holding company system, or by the insurance holding company system on a consolidated basis.

Section 26. Paragraph (a) of subsection (1) of section 629.401, Florida Statutes, is amended to read:

629.401 Insurance exchange.

- (1) There may be created one or more insurance exchanges, with one or more offices each, subject to such rules as are adopted by the commission. For the purposes of this section, the term "exchange" applies to any such insurance exchange proposed or created under this section. The purposes of the exchange are:
 - (a) To provide a facility for the underwriting of:
 - 1. Reinsurance of all kinds of insurance.
- 2. Direct insurance of all kinds on risks located entirely outside the United States.
- 3. Surplus lines insurance for risks located in this state eligible for export under s. 626.916 or s. 626.917 and placed through a licensed Florida surplus lines agent subject to compliance with the provisions of ss. 626.921, 626.922, 626.923, 626.924, 626.929, 626.9295, and 626.930, and 626.931. With respect to compliance with s. 626.924, the required legend may refer to any coverage provided for by a security fund

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established under paragraph (3)(d).

4. Surplus lines insurance in any other state subject to the applicable surplus lines laws of such other state for risks located entirely outside of this state.

Section 27. Section 634.171, Florida Statutes, is amended to read:

634.171 Salesperson to be licensed and appointed; exceptions. - Salespersons for motor vehicle service agreement companies and insurers shall be licensed, appointed, renewed, continued, reinstated, or terminated as prescribed in chapter 626 for insurance representatives in general. However, they shall be exempt from all other provisions of chapter 626 including fingerprinting, photo identification, education, and examination provisions. License, appointment, and other fees shall be those prescribed in s. 624.501. A licensed and appointed salesperson shall be directly responsible and accountable for all acts of her or his employees and other representatives. Each service agreement company or insurer shall, on forms prescribed by the department, within 30 days after termination of the appointment, notify the department of such termination. No employee or salesperson of a motor vehicle service agreement company or insurer may directly or indirectly solicit or negotiate insurance contracts, or hold herself or himself out in any manner to be an insurance agent, unless so qualified, licensed, and appointed therefor under the Florida Insurance Code. A licensed personal lines or general lines agent may solicit, negotiate, advertise, or sell motor vehicle service agreements and is not required to be licensed under this section. A motor vehicle service agreement company is not

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required to be licensed as a salesperson to solicit, sell, issue, or otherwise transact the motor vehicle service agreements issued by the motor vehicle service agreement company.

Section 28. Section 634.317, Florida Statutes, is amended to read:

634.317 License and appointment required; exception.-No person may solicit, negotiate, or effectuate home warranty contracts for remuneration in this state unless such person is licensed and appointed as a sales representative. A licensed and appointed sales representative shall be directly responsible and accountable for all acts of the licensee's employees. A licensed personal lines or general lines agent may solicit, negotiate, advertise, or sell home warranty contracts and is not required to be licensed under this section.

Section 29. Section 634.419, Florida Statutes, is amended to read:

634.419 License and appointment required; exception.-No person or entity shall solicit, negotiate, advertise, or effectuate service warranty contracts in this state unless such person or entity is licensed and appointed as a sales representative. Sales representatives shall be responsible for the actions of persons under their supervision. However, a service warranty association licensed as such under this part shall not be required to be licensed and appointed as a sales representative to solicit, negotiate, advertise, or effectuate its products. A licensed personal lines or general lines agent may solicit, negotiate, advertise, or sell service warranty contracts and is not required to be licensed under this section.



881	Section 30. The Division of Law Revision is directed to
882	create chapter 647, Florida Statutes, consisting of ss. 647.01-
883	647.08, Florida Statutes, to be entitled "Travel Insurance."
884	Section 31. Section 647.01, Florida Statutes, is created to
885	read:
886	647.01 Purpose and scope.—
887	(1) The purpose of this chapter is to promote the public
888	welfare by creating a comprehensive legal framework within which
889	travel insurance may be sold in this state.
890	(2) This chapter applies to:
891	(a) Travel insurance that covers any resident of this state
892	and that is sold, solicited, negotiated, or offered in this
893	state.
894	(b) Policies and certificates that are delivered or issued
895	for delivery in this state.
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897	This chapter does not apply to cancellation fee waivers or
898	travel assistance services, except as expressly provided in this
899	chapter.
900	(3) All other applicable provisions of the insurance laws
901	of this state continue to apply to travel insurance, except that
902	the specific provisions of this chapter shall supersede any
903	general provisions of law that would otherwise be applicable to
904	travel insurance.
905	Section 32. Section 647.02, Florida Statutes, is created to
906	read:
907	647.02 Definitions.—As used in this chapter, the term:
908	(1) "Aggregator site" means a website that provides access
909	to information regarding insurance products from more than one

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insurer, including product and insurer information, for use in comparison shopping.

- (2) "Blanket travel insurance" means a policy of travel insurance issued to an eligible group providing coverage to all members of the eligible group without a separate charge to individual members of the eligible group.
- (3) "Cancellation fee waiver" means a contractual agreement between a supplier of travel services and its customer to waive some or all of the nonrefundable cancellation fee provisions of the supplier's underlying travel contract with or without regard to the reason for the cancellation or form of reimbursement. A cancellation fee waiver is not insurance.
- (4) "Department" means the Department of Financial Services.
- (5) "Eligible group," solely for the purposes of travel insurance, means two or more persons who are engaged in a common enterprise or who have an economic, educational, or social affinity or relationship, including, but not limited to, any of the following:
- (a) An entity engaged in the business of providing travel or travel services, including, but not limited to:
- 1. A tour operator, lodging provider, vacation property owner, hotel, resort, travel club, travel agency, property manager, and cultural exchange program.
- 2. An operator, owner, or lessor of a means of transportation of passengers, including, but not limited to, a common carrier, airline, cruise line, railroad, steamship company, and public bus carrier.

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939 With regard to any particular travel or type of travel or 940 travelers, all members or customers of the group must have a 941 common exposure to risk attendant to such travel. 942 (b) A university, college, school, or other institution of 943 learning, covering students, teachers, employees, or volunteers. 944 (c) An employer covering any group of employees, 945

- volunteers, contractors, board of directors, dependents, or quests.
- (d) A sports team or camp, or a sponsor thereof, covering participants, members, campers, employees, officials, supervisors, or volunteers.
- (e) A religious, charitable, recreational, educational, or civic organization, or a branch thereof, covering any group of members, participants, or volunteers.
- (f) A financial institution or financial institution vendor, or a parent holding company, trustee, or agent of or designated by one or more financial institutions or financial institution vendors, including account holders, credit card holders, debtors, quarantors, or purchasers.
- (g) An incorporated or unincorporated association, including a labor union, having a common interest and constitution and bylaws, which is organized and maintained in good faith for purposes other than obtaining insurance coverage for its members or participants.
- (h) A trust or the trustees of a fund that covers its members, employees, or customers and is established, created, or maintained for the benefit of its members, employees, or customers, subject to:
 - 1. The department's authorizing the use of a trust.

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- 2. The premium tax provisions in s. 647.03 applicable to incorporated or unincorporated associations that have a common interest and constitution and bylaws and that are organized and maintained in good faith for purposes other than obtaining insurance coverage for their members, employees, or customers. (i) An entertainment production company covering any group of participants, volunteers, audience members, contestants, or workers. (j) A volunteer fire department, ambulance, rescue, police, court, first-aid, civil defense, or other such volunteer group. (k) A preschool, daycare institution for children or adults, or senior citizen club. (1) An automobile or truck rental or leasing company covering a group of individuals who may become renters, lessees, or passengers as defined by their travel status on the rented or leased vehicles. The common carrier, the operator, owner, or lessor of a means of transportation, or the motor vehicle or truck rental or leasing company is the policyholder under a policy to which this section applies.
- (m) Any other group for which the department has made the following determinations:
- 1. The group members are engaged in a common enterprise or have an economic, educational, or social affinity or relationship.
- 2. Issuance of the travel insurance policy is not contrary to the public interest.
- (6) "Fulfillment materials" means documentation sent to the purchaser of a travel protection plan confirming the purchase and providing the travel protection plan's coverage and



997	assistance details.
998	(7) "Group travel insurance" means travel insurance issued
999	to an eligible group.
1000	(8) "Limited lines travel insurance producer" means:
1001	(a) A licensed or third-party administrator;
1002	(b) A licensed insurance producer, including a limited
1003	lines producer; or
1004	(c) A travel administrator.
1005	(9) "Travel administrator" means a person who directly or
1006	indirectly underwrites policies for; collects charges,
1007	collateral, or premiums from; or adjusts or settles claims made
1008	by residents of this state in connection with travel insurance,
1009	except that a person is not considered a travel administrator if
1010	the person is:
1011	(a) A person working for a travel administrator, to the
1012	extent that the person's activities are subject to the
1013	supervision and control of the travel administrator;
1014	(b) An insurance producer selling insurance or engaged in
1015	administrative and claims-related activities within the scope of
1016	the producer's license;
1017	(c) A travel retailer, as defined s. 626.321(1)(c)2.,
1018	offering and disseminating travel insurance and registered under
1019	the license of a limited lines travel insurance producer in
1020	accordance with s. 626.321(1)(c);
1021	(d) A person adjusting or settling claims in the normal
1022	course of the person's practice or employment as an attorney at
1023	law, without collecting charges or premiums in connection with
1024	insurance coverage; or

(e) A business entity that is affiliated with a licensed

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1026 insurer while acting as a travel administrator for the direct 1027 and assumed insurance business of the affiliated insurer. (10) "Travel assistance services" means noninsurance 1028 1029 services for which the consumer is not indemnified based on a 1030 fortuitous event, and the provision of which does not result in 1031 the transfer or shifting of risk which would constitute the 1032 business of insurance. The term includes, but is not limited to, 1033 security advisories, destination information, vaccination and 1034 immunization information services, travel reservation services, 1035 entertainment, activity and event planning, translation 1036 assistance, emergency messaging, international legal and medical 1037 referrals, medical case monitoring, coordination of 1038 transportation arrangements, emergency cash transfer assistance, 1039 medical prescription replacement assistance, passport and travel 1040 document replacement assistance, lost luggage assistance, concierge services, and any other service that is furnished in 1041 connection with planned travel. Travel assistance services are 1042 not insurance and are not related to insurance. 1043 1044 (11) "Travel insurance" means insurance coverage for 1045 personal risks incidental to planned travel, including: 1046 (a) Interruption or cancellation of trip or event; 1047 (b) Loss of baggage or personal effects; 1048 (c) Damages to accommodations or rental vehicles; (d) Sickness, accident, disability, or death occurring 1049 1050 during travel; 1051 (e) Emergency evacuation; 1052 (f) Repatriation of remains; or 1053 (q) Any other contractual obligations to indemnify or pay a specified amount to the traveler upon determinable contingencies 1054



1055 related to travel, as determined by the office. 1056 The term does not include major medical plans that provide 1057 1058 comprehensive medical protection for travelers with trips 1059 lasting longer than 6 months, including major medical plans for 1060 those working or residing overseas as expatriates, or any other product that requires a specific insurance producer license. 1061 1062 (12) "Travel protection plan" means a plan that provides 1063 one or more of the following: travel insurance, travel 1064 assistance services, and cancellation fee waivers. 1065 Section 33. Section 647.03, Florida Statutes, is created to 1066 read: 1067 647.03 Premium tax.— 1068 (1) As used in this section, the term: 1069 (a) "Primary certificateholder" means an individual who 1070 purchases travel insurance under a group policy. (b) "Primary policyholder" means an individual who 1071 1072 purchases individual travel insurance. 1073 (2) A travel insurer shall pay the premium tax, as required 1074 under s. 624.509, on travel insurance premiums paid by any of 1075 the following: 1076 (a) A primary policyholder who is a resident of this state. 1077 (b) A primary certificateholder who is a resident of this 1078 state. 1079 (c) A blanket travel insurance policyholder: 1080 1. Who is a resident in this state; 1081 2. Who has his or her principal place of business in this 1082 state; or 1083 3. Whose affiliate or subsidiary who has purchased blanket



travel insurance for eligible blanket group members has his or her principal place of business in this state.

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- The premium tax under this subsection is subject to any apportionment rules that apply to an insurer across multiple taxing jurisdictions or that authorize an insurer to allocate premium on an apportioned basis in a reasonable and equitable manner in those jurisdictions.
 - (3) A travel insurer shall:
- (a) Document the state of residence or principal place of business of the policyholder or certificateholder, or an affiliate or subsidiary thereof, as required under subsection (2).
- (b) Report as premium only the amount allocable to travel insurance and not any amounts received for travel assistance services or cancellation fee waivers.
- Section 34. Section 647.04, Florida Statutes, is created to read:
- 647.04 Travel protection plans.—A travel protection plan may be offered for one price for the combined features that the travel protection plan offers in this state if the travel protection plan meets all of the following requirements:
- (1) The travel protection plan clearly discloses to the consumer, at or before the time of purchase, that it includes travel insurance, travel assistance services, and cancellation fee waivers, as applicable, and provides information and an opportunity, at or before the time of purchase, for the consumer to obtain additional information regarding the features and pricing of each.



1113 (2) The fulfillment materials: (a) Describe and delineate the travel insurance, travel 1114 1115 assistance services, and cancellation fee waivers in the travel 1116 protection plan. 1117 (b) Include the travel insurance disclosures required in 1118 this chapter, the contact information for persons providing travel assistance services, and cancellation fee waivers, as 1119 1120 applicable. Section 35. Section 647.05, Florida Statutes, is created to 1121 1122 read: 1123 647.05 Sales practices.— 1124 (1) (a) All documents provided to a consumer before the 1125 purchase of travel insurance, including, but not limited to, 1126 sales materials, advertising materials, and marketing materials, 1127 must be consistent with the travel insurance policy, including, but not limited to, forms, endorsements, policies, rate filings, 1128 1129 and certificates of insurance. 1130 (b) For travel insurance policies or certificates that 1131 contain preexisting condition exclusions, information and an 1132 opportunity to learn more about the preexisting condition 1133 exclusions must be provided any time before the purchase. 1134 Information on the exclusions and the opportunity to learn more 1135 about these exclusions must be included in the coverage's 1136 fulfillment materials. 1137 (c) The fulfillment materials and the information described 1138 in s. 626.321(1)(c)3.a. must be provided to a policyholder or 1139 certificateholder as soon as practicable after the purchase of a travel protection plan. Unless the insured has started a covered 1140 1141 trip or filed a claim under the travel insurance coverage, the

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policyholder or certificateholder may cancel a policy or 1142 certificate for a full refund of the travel protection plan 1143 1144 price from the date of purchase of a travel protection plan 1145 until at least:

- 1. Fifteen days after the date of delivery of the travel protection plan's fulfillment materials by postal mail; or
- 2. Ten days after the date of delivery of the travel protection plan's fulfillment materials by means other than postal mail.

For the purposes of this paragraph, the term "delivery" means handing fulfillment materials to the policyholder or certificateholder or sending fulfillment materials by postal mail or electronic means to the policyholder or certificateholder.

- (d) An insurer shall disclose in the policy documentation and fulfillment materials whether the travel insurance is primary or secondary to other applicable coverage.
- (e) If travel insurance is marketed directly to a consumer through an insurer's website or by others through an aggregator site, it is not an unfair trade practice or other violation of law if the following requirements are met:
- 1. The web page provides an accurate summary or short description of the coverage.
- 2. The consumer has access to the full provisions of the policy through electronic means.
- (2) A person offering, soliciting, or negotiating travel insurance or travel protection plans on an individual or group basis may not do so by using a negative or opt-out option that

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would require a consumer to take an affirmative action to deselect coverage, such as unchecking a box on an electronic form, when the consumer purchases a trip.

- (3) If a consumer's destination jurisdiction requires insurance coverage, it is not an unfair trade practice to require that the consumer choose between the following options as a condition of purchasing a trip or travel package:
- (a) Purchasing the coverage required by the destination jurisdiction through the travel retailer, as defined s. 626.321(1)(c)2., or limited lines travel insurance producer supplying the trip or travel package; or
- (b) Agreeing to obtain and provide proof of coverage that meets the destination jurisdiction's requirements before departure.
- (4) (a) A person offering travel insurance to residents of this state is subject to part IX of chapter 626, the Unfair Insurance Trade Practices Act, except as otherwise provided in this chapter. If a conflict arises between this chapter and the Unfair Insurance Trade Practices Act regarding the sale and marketing of travel insurance and travel protection plans, the provisions of this chapter shall control.
- (b) A person commits an unfair insurance trade practice under the Unfair Insurance Trade Practices Act if the person:
- 1. Offers or sells a travel insurance policy that could never result in payment of any claims for any insured under the policy; or
- 2. Markets blanket travel insurance coverage as free. Section 36. Section 647.06, Florida Statutes, is created to read:



1200	647.06 Travel administrators.—
1201	(1) Notwithstanding any other provision of the Florida
1202	Insurance Code, a person may not act or represent himself or
1203	herself as a travel administrator in this state unless the
1204	<pre>person:</pre>
1205	(a) Is a licensed and appointed property and casualty
1206	insurance producer in this state for activities authorized under
1207	that producer license;
1208	(b) Is a licensed insurance agency, appointed as a managing
1209	general agent in this state; or
1210	(c) Holds a valid third-party administrator license in this
1211	state.
1212	(2) A travel administrator and its employees are exempt
1213	from the licensing requirements of part VI of chapter 626 for
1214	the travel insurance it administers.
1215	(3) An insurer is responsible for ensuring that a travel
1216	administrator administering travel insurance underwritten by the
1217	<pre>insurer:</pre>
1218	(a) Acts in accordance with this chapter.
1219	(b) Maintains all books and records that are relevant to
1220	the insurer and makes these books and records available to the
1221	department upon request.
1222	Section 37. Section 647.07, Florida Statutes, is created to
1223	read:
1224	647.07 Travel insurance policy.—
1225	(1) Notwithstanding any other provision of the Florida
1226	Insurance Code, travel insurance shall be classified and filed
1227	for purposes of rates and forms under the inland marine line of
1228	insurance; however, travel insurance that provides coverage for



1229 sickness, accident, disability, or death occurring during 1230 travel, either exclusively or in conjunction with related 1231 coverages of emergency evacuation or repatriation of remains, or 1232 incidental limited property and casualty benefits, such as 1233 baggage or trip cancellation, may be classified and filed for 1234 purposes of rates and forms under either the accident and health 1235 line of insurance or the inland marine line of insurance. 1236 (2) Travel insurance may be in the form of an individual, 1237 group, or blanket policy. Group or blanket policies are 1238 classified as commercial inland marine insurance under s. 627.021(2)(d). Travel insurance policies not issued to a 1239 1240 commercial entity and primarily used for personal, family, or 1241 household purposes are considered personal inland marine 1242 insurance and shall not be subject to s. 627.062. Sections of 1243 policies or endorsements for travel insurance which are 1244 considered personal inland marine insurance consisting of travel 1245 assistance services or cancellation fee waivers are not subject to s. 627.410. 1246 1247 (3) Travel insurance programs may be developed and provided 1248 based on travel protection plans designed for individual or 1249 identified marketing or distribution channels. Section 38. Section 647.08, Florida Statutes, is created to 1250 1251 read: 1252 647.08 Rulemaking authority.—The department shall adopt 1253 rules to administer this chapter. 1254 Section 39. Except as otherwise expressly provided in this 1255 act and except for this section, which shall take effect upon 1256 this act becoming a law, this act shall take effect July 1, 2020. 1257

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1259 ===== T I T L E A M E N D M E N T =====: And the title is amended as follows:

Delete everything before the enacting clause and insert:

A bill to be entitled

An act relating to financial services; amending s. 215.555, F.S.; redefining the term "covered policy" under the Florida Hurricane Catastrophe Fund in relation to certain collateral protection insurance policies; amending s. 319.30, F.S.; revising a certain electronic signature requirement for a motor vehicle salvage certificate of title; amending ss. 440.12 and 440.20, F.S.; authorizing the payment of certain workers' compensation benefits to be transmitted to the employee's account with a licensed money transmitter; amending s. 624.155, F.S.; revising requirements and procedures for the civil remedy notice provided to insurers and the Department of Financial Services; revising the timeframe for an insurer to pay damages or for certain circumstances to be corrected; revising circumstances that toll the applicable statute of limitations and the period the statute of limitations is tolled; amending s. 624.307, F.S.; providing that certain aggregate information containing trade secret information may be publicly disclosed by the department or the Office of Insurance Regulation except under certain circumstances; prohibiting the Commissioner of Insurance Regulation

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from certain lobbying for compensation during a specified timeframe after vacation of public position; amending s. 624.315, F.S.; providing that certain aggregate information containing trade secret information may be publicly disclosed by the department or office, except under certain circumstances; amending s. 624.422, F.S., requiring insurers to file with the department certain contact information for service of process; requiring the department to publish such information on its website; amending s. 626.321, F.S.; providing that certain travel insurance licenses are subject to review by the department rather than by the office; revising persons who may be licensed to transact in travel insurance; specifying licensure and registration requirements for certain persons; defining the term "travel retailer"; specifying requirements for, restrictions on, and authorized acts by travel retailers and limited lines travel insurance producers; defining the term "offer and disseminate"; authorizing certain persons to sell, solicit, and negotiate travel insurance; amending s. 626.854, F.S.; revising a notice requirement before certain persons acting on behalf of a residential property insurer may schedule an onsite inspection of the insured property; prohibiting a certain attempt to conduct an unscheduled meeting with the insured or claimant; amending s. 626.931, F.S.; deleting a requirement for certain surplus lines agents to file quarterly affidavits with the Florida Surplus Lines

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Service Office; conforming cross-references; amending s. 626.932, F.S.; revising the time when surplus lines agents must remit surplus lines taxes; amending s. 626.935, F.S.; conforming a provision to changes made by the act; amending s. 627.062, F.S.; specifying that certain periods ending on a weekend or on certain holidays are extended until the conclusion of the next business day; prohibiting the office from disapproving a homeowners' insurance rate in a rate filing solely on specified grounds; amending s. 627.0629, F.S.; authorizing, rather than requiring, rate filings for certain residential property insurance to include certain rate factors; amending ss. 627.0651 and 627.410, F.S.; specifying that certain periods ending on a weekend or on certain holidays are extended until the conclusion of the next business day; amending s. 627.7011, F.S.; authorizing an insurer to offer specified homeowner's policies or endorsements that adjust certain losses on certain roofs on an actual cash value basis; providing that a policy or endorsement is deemed to provide replacement cost coverage unless the insured makes a selection of actual cash value coverage; requiring the selection form to contain a specified notice; specifying a method by which an applicant may make such selection; amending s. 627.70132, F.S.; adding property insurance coverages for which a notice of a claim must be given to the insurer within a specified timeframe or be barred; specifying a timeframe for such notice for

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supplemental or reopened claims; providing applicability; amending s. 627.714, F.S.; revising criteria for assessing a residential condominium unit owner's loss assessment coverage; reviving, reenacting, and amending s. 627.715(4), F.S.; providing an exemption from a diligent effort requirement for surplus lines agents exporting contracts or endorsements providing flood coverage; providing for expiration; amending s. 627.7152, F.S.; specifying the manner in which an assignee of certain property insurance policy benefits must serve a notice of intent to initiate litigation; amending s. 627.7295, F.S.; decreasing the timeframe during which an insurer may not cancel a new policy or binder of motor vehicle insurance for nonpayment of premium, except under certain circumstances; amending s. 627.914, F.S.; requiring insurers or self-insurance funds that write workers' compensation insurance and that are in receivership to continue to report certain information to the office; authorizing the outsourcing of reporting under certain circumstances; requiring the office to approve a certain reporting plan; authorizing the office to use the information for certain purposes; amending s. 628.801, F.S.; specifying that the office may examine an insurer's managing general agent or insurance holding company; amending s. 629.401, F.S.; revising criteria for surplus lines insurance in insurance exchanges; amending ss. 634.171, 634.317, and 634.419, F.S.;

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authorizing licensed personal lines and general lines agents to solicit, negotiate, advertise, or sell motor vehicle service agreements, home warranty contracts, and service warranty contracts, respectively, without specified licenses; creating ch. 647, F.S., entitled "Travel Insurance"; creating s. 647.01, F.S.; providing legislative purpose; providing applicability; creating s. 647.02, F.S.; defining terms; creating s. 647.03, F.S.; defining the terms "primary certificateholder" and "primary policyholder"; requiring travel insurers to pay the insurance premium tax on specified travel insurance premiums; providing construction; specifying requirements for travel insurers; creating s. 647.04, F.S.; providing that a travel protection plan may be offered for one price if its meets specified requirements; creating s. 647.05, F.S.; specifying sales practice requirements, prohibited sales practices, and authorized sales practices relating to travel insurance; specifying a policyholder or certificateholder's right to cancel a travel protection plan for a full refund; defining the term "delivery"; specifying unfair insurance trade practices; providing construction; creating s. 647.06, F.S.; specifying qualifications for travel administrators; providing an exemption from certain licensure; providing that insurers are responsible for ensuring certain acts by travel administrators; creating s. 647.07, F.S.; specifying the



classification for travel insurance for rate filing	
purposes; specifying authorized forms of travel	
insurance; providing applicability of certain	
provisions of the Rating Law; authorizing the	
development and provision of travel insurance program	ns
on certain bases; creating s. 647.08, F.S.; requiring	3
the department to adopt rules; providing effective	
dates.	