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1
2 An act relating to motor vehicle insurance coverage
3 exclusions; creating s. 627.747, F.S.; providing that
4 private passenger motor vehicle policies may exclude
5 certain coverages for claims resulting from the
6 operation of motor vehicles by identified individuals
7 under certain circumstances; requiring excluded
8 drivers to meet certain requirements for financial
9 responsibility; amending ss. 324.151, 627.736, and
10 627.7407, F.S.; conforming provisions to changes made
11 by the act; providing an effective date.
12

13 Be It Enacted by the Legislature of the State of Florida:
14

15 Section 1. Section 627.747, Florida Statutes, is created to
16 read:

17 627.747 Named driver exclusion.-

18 (1) A private passenger motor vehicle policy may exclude
19 the following coverages for all claims or suits resulting from
20 the operation of a motor vehicle by an identified individual who
21 is not a named insured, provided the identified individual is
22 named on the declarations page or by endorsement and the named
23 insured consents in writing to such exclusion:

24 (a) Notwithstanding the Florida Motor Vehicle No-Fault Law,
25 the personal injury protection coverage specifically applicable
26 to the identified individual's injuries, lost wages, and death
27 benefits.

28 (b) Property damage liability coverage.

29 (c) Bodily injury liability coverage, if required by law

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30 and purchased by the named insured.

31 (d) Uninsured motorist coverage for any damages sustained
32 by the identified excluded individual, if the named insured has
33 purchased such coverage.

34 (e) Any coverage the named insured is not required by law
35 to purchase.

36 (2) A private passenger motor vehicle policy may not
37 exclude coverage when:

38 (a) The identified individual is injured while not
39 operating a motor vehicle;

40 (b) The identified individual is being excluded solely
41 because of his or her race, color, religion, sex, national
42 origin, age, handicap, pregnancy, or marital status; or

43 (c) The exclusion is inconsistent with the underwriting
44 rules filed by the insurer pursuant to s. 627.0651(13)(a).

45 (3) A driver excluded pursuant to this section must:

46 (a) Establish, maintain, and show proof of financial
47 ability to respond for damages arising out of the ownership,
48 maintenance, or use of a motor vehicle as required by chapter
49 324; and

50 (b) Maintain security as required by s. 627.733.

51 Section 2. Paragraph (a) of subsection (1) of section
52 324.151, Florida Statutes, is amended to read:

53 324.151 Motor vehicle liability policies; required
54 provisions.—

55 (1) A motor vehicle liability policy to be proof of
56 financial responsibility under s. 324.031(1) ~~✓~~ shall be issued to
57 owners or operators under the following provisions:

58 (a) An owner's liability insurance policy must ~~shall~~

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59 designate by explicit description or by appropriate reference
60 all motor vehicles with respect to which coverage is thereby
61 granted, must ~~and shall~~ insure the owner named therein, and,
62 except for a named driver excluded under s. 627.747, must insure
63 any other person as operator using such motor vehicle or motor
64 vehicles with the express or implied permission of such owner
65 against loss from the liability imposed by law for damage
66 arising out of the ownership, maintenance, or use of such motor
67 vehicle or motor vehicles within the United States or the
68 Dominion of Canada, subject to limits, exclusive of interest and
69 costs with respect to each such motor vehicle as is provided for
70 under s. 324.021(7). Insurers may make available, with respect
71 to property damage liability coverage, a deductible amount not
72 to exceed \$500. In the event of a property damage loss covered
73 by a policy containing a property damage deductible provision,
74 the insurer shall pay to the third-party claimant the amount of
75 any property damage liability settlement or judgment, subject to
76 policy limits, as if no deductible existed.

77 Section 3. Subsection (1) of section 627.736, Florida
78 Statutes, is amended to read:

79 627.736 Required personal injury protection benefits;
80 exclusions; priority; claims.—

81 (1) REQUIRED BENEFITS.—An insurance policy complying with
82 the security requirements of s. 627.733 must provide personal
83 injury protection to the named insured, relatives residing in
84 the same household unless excluded under s. 627.747, persons
85 operating the insured motor vehicle, passengers in the motor
86 vehicle, and other persons struck by the motor vehicle and
87 suffering bodily injury while not an occupant of a self-

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88 propelled vehicle, subject to subsection (2) and paragraph
89 (4) (e), to a limit of \$10,000 in medical and disability benefits
90 and \$5,000 in death benefits resulting from bodily injury,
91 sickness, disease, or death arising out of the ownership,
92 maintenance, or use of a motor vehicle as follows:

93 (a) *Medical benefits.*—Eighty percent of all reasonable
94 expenses for medically necessary medical, surgical, X-ray,
95 dental, and rehabilitative services, including prosthetic
96 devices and medically necessary ambulance, hospital, and nursing
97 services if the individual receives initial services and care
98 pursuant to subparagraph 1. within 14 days after the motor
99 vehicle accident. The medical benefits provide reimbursement
100 only for:

101 1. Initial services and care that are lawfully provided,
102 supervised, ordered, or prescribed by a physician licensed under
103 chapter 458 or chapter 459, a dentist licensed under chapter
104 466, a chiropractic physician licensed under chapter 460, or an
105 advanced practice registered nurse registered under s. 464.0123
106 or that are provided in a hospital or in a facility that owns,
107 or is wholly owned by, a hospital. Initial services and care may
108 also be provided by a person or entity licensed under part III
109 of chapter 401 which provides emergency transportation and
110 treatment.

111 2. Upon referral by a provider described in subparagraph
112 1., followup services and care consistent with the underlying
113 medical diagnosis rendered pursuant to subparagraph 1. which may
114 be provided, supervised, ordered, or prescribed only by a
115 physician licensed under chapter 458 or chapter 459, a
116 chiropractic physician licensed under chapter 460, a dentist

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117 licensed under chapter 466, or an advanced practice registered
118 nurse registered under s. 464.0123, or, to the extent permitted
119 by applicable law and under the supervision of such physician,
120 osteopathic physician, chiropractic physician, or dentist, by a
121 physician assistant licensed under chapter 458 or chapter 459 or
122 an advanced practice registered nurse licensed under chapter
123 464. Followup services and care may also be provided by the
124 following persons or entities:

125 a. A hospital or ambulatory surgical center licensed under
126 chapter 395.

127 b. An entity wholly owned by one or more physicians
128 licensed under chapter 458 or chapter 459, chiropractic
129 physicians licensed under chapter 460, advanced practice
130 registered nurses registered under s. 464.0123, or dentists
131 licensed under chapter 466 or by such practitioners and the
132 spouse, parent, child, or sibling of such practitioners.

133 c. An entity that owns or is wholly owned, directly or
134 indirectly, by a hospital or hospitals.

135 d. A physical therapist licensed under chapter 486, based
136 upon a referral by a provider described in this subparagraph.

137 e. A health care clinic licensed under part X of chapter
138 400 which is accredited by an accrediting organization whose
139 standards incorporate comparable regulations required by this
140 state, or

141 (I) Has a medical director licensed under chapter 458,
142 chapter 459, or chapter 460;

143 (II) Has been continuously licensed for more than 3 years
144 or is a publicly traded corporation that issues securities
145 traded on an exchange registered with the United States

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146 Securities and Exchange Commission as a national securities
147 exchange; and

148 (III) Provides at least four of the following medical
149 specialties:

150 (A) General medicine.

151 (B) Radiography.

152 (C) Orthopedic medicine.

153 (D) Physical medicine.

154 (E) Physical therapy.

155 (F) Physical rehabilitation.

156 (G) Prescribing or dispensing outpatient prescription
157 medication.

158 (H) Laboratory services.

159 3. Reimbursement for services and care provided in
160 subparagraph 1. or subparagraph 2. up to \$10,000 if a physician
161 licensed under chapter 458 or chapter 459, a dentist licensed
162 under chapter 466, a physician assistant licensed under chapter
163 458 or chapter 459, or an advanced practice registered nurse
164 licensed under chapter 464 has determined that the injured
165 person had an emergency medical condition.

166 4. Reimbursement for services and care provided in
167 subparagraph 1. or subparagraph 2. is limited to \$2,500 if a
168 provider listed in subparagraph 1. or subparagraph 2. determines
169 that the injured person did not have an emergency medical
170 condition.

171 5. Medical benefits do not include massage as defined in s.
172 480.033 or acupuncture as defined in s. 457.102, regardless of
173 the person, entity, or licensee providing massage or
174 acupuncture, and a licensed massage therapist or licensed

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175 acupuncturist may not be reimbursed for medical benefits under
176 this section.

177 6. The Financial Services Commission shall adopt by rule
178 the form that must be used by an insurer and a health care
179 provider specified in sub-subparagraph 2.b., sub-subparagraph
180 2.c., or sub-subparagraph 2.e. to document that the health care
181 provider meets the criteria of this paragraph. Such rule must
182 include a requirement for a sworn statement or affidavit.

183 (b) *Disability benefits.*—Sixty percent of any loss of gross
184 income and loss of earning capacity per individual from
185 inability to work proximately caused by the injury sustained by
186 the injured person, plus all expenses reasonably incurred in
187 obtaining from others ordinary and necessary services in lieu of
188 those that, but for the injury, the injured person would have
189 performed without income for the benefit of his or her
190 household. All disability benefits payable under this provision
191 must be paid at least every 2 weeks.

192 (c) *Death benefits.*—Death benefits of \$5,000 per
193 individual. Death benefits are in addition to the medical and
194 disability benefits provided under the insurance policy. The
195 insurer may pay death benefits to the executor or administrator
196 of the deceased, to any of the deceased's relatives by blood,
197 legal adoption, or marriage, or to any person appearing to the
198 insurer to be equitably entitled to such benefits.

199
200 Only insurers writing motor vehicle liability insurance in this
201 state may provide the required benefits of this section, and
202 such insurer may not require the purchase of any other motor
203 vehicle coverage other than the purchase of property damage

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204 liability coverage as required by s. 627.7275 as a condition for
205 providing such benefits. Insurers may not require that property
206 damage liability insurance in an amount greater than \$10,000 be
207 purchased in conjunction with personal injury protection. Such
208 insurers shall make benefits and required property damage
209 liability insurance coverage available through normal marketing
210 channels. An insurer writing motor vehicle liability insurance
211 in this state who fails to comply with such availability
212 requirement as a general business practice violates part IX of
213 chapter 626, and such violation constitutes an unfair method of
214 competition or an unfair or deceptive act or practice involving
215 the business of insurance. An insurer committing such violation
216 is subject to the penalties provided under that part, as well as
217 those provided elsewhere in the insurance code.

218 Section 4. Paragraph (a) of subsection (5) of section
219 627.7407, Florida Statutes, is amended to read:

220 627.7407 Application of the Florida Motor Vehicle No-Fault
221 Law.—

222 (5) No later than November 15, 2007, each motor vehicle
223 insurer shall provide notice of the provisions of this section
224 to each motor vehicle insured who is subject to subsection (1).
225 The notice is not subject to approval by the Office of Insurance
226 Regulation. The notice must clearly inform the policyholder:

227 (a) That beginning on January 1, 2008, Florida law requires
228 the policyholder to maintain personal injury protection ("PIP")
229 insurance coverage and that this insurance pays covered medical
230 expenses for injuries sustained in a motor vehicle crash by the
231 policyholder, passengers, and relatives residing in the
232 policyholder's household unless excluded under s. 627.747.

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Section 5. This act shall take effect July 1, 2021.