



824756

LEGISLATIVE ACTION

Senate

.

House

.

.

Floor: 1/AD/2R

.

04/14/2021 07:02 PM

.

.

Senator Burgess moved the following:

Senate Amendment (with title amendment)

Delete lines 820 - 3498

and insert:

(2) As used in this section, the term:

(a) "Motor vehicle" means any self-propelled vehicle that has four or more wheels and that is of a type designed and required to be licensed for use on the highways of this state, and any trailer or semitrailer designed for use with such vehicle. The term does not include the following:

1. A mobile home as defined in s. 320.01.



824756

12 2. A motor vehicle that is used in mass transit and
13 designed to transport more than five passengers, exclusive of
14 the operator of the motor vehicle, and that is owned by a
15 municipality, transit authority, or political subdivision of the
16 state.

17 3. A school bus as defined in s. 1006.25, which must
18 maintain security as required under s. 316.615.

19 4. A commercial motor vehicle as defined in s. 207.002 or
20 s. 320.01(25), which must maintain security as required under
21 ss. 324.031 and 627.7415.

22 5. A nonpublic sector bus, which must maintain security as
23 required under ss. 324.031 and 627.742.

24 ~~6.4. A vehicle providing for-hire passenger transportation~~
25 ~~vehicle, which must that is subject to the provisions of s.~~
26 ~~324.031. A taxicab shall maintain security as required under s.~~
27 ~~324.032 s. 324.032(1).~~

28 ~~7.5. A personal delivery device as defined in s. 316.003.~~

29 8. A motorcycle as defined in s. 320.01(26), unless s.
30 324.051 applies; in such case, paragraph (1)(a) and the
31 applicable proof of insurance provisions of s. 320.02 apply.

32 (b) "Owner" means the person who holds legal title to a
33 motor vehicle or the debtor or lessee who has the right to
34 possession of a motor vehicle that is the subject of a security
35 agreement or lease with an option to purchase.

36 (3) Each nonresident owner or registrant of a motor vehicle
37 that, whether operated or not, has been physically present
38 within this state for more than 90 days during the preceding 365
39 days shall maintain security as required by subsection (1). The
40 security must be that is in effect continuously throughout the



824756

41 period the motor vehicle remains within this state.

42 (4) ~~An~~ The owner or registrant of a motor vehicle who is
43 ~~exempt from the requirements of this section if she or he is a~~
44 member of the United States Armed Forces and is called to or on
45 active duty outside the United States in an emergency situation
46 is exempt from this section while he or she. ~~The exemption~~
47 ~~provided by this subsection applies only as long as the member~~
48 ~~of the Armed Forces is on such active duty.~~ This exemption
49 ~~outside the United States and applies only while the vehicle~~
50 covered by the security is not operated by any person. Upon
51 receipt of a written request by the insured to whom the
52 exemption provided in this subsection applies, the insurer shall
53 cancel the coverages and return any unearned premium or suspend
54 the security required by this section. Notwithstanding s.
55 324.0221(2) ~~s. 324.0221(3)~~, the department may not suspend the
56 registration or operator's license of an ~~any~~ owner or registrant
57 of a motor vehicle during the time she or he qualifies for the
58 ~~an~~ exemption under this subsection. An ~~Any~~ owner or registrant
59 of a motor vehicle who qualifies for the ~~an~~ exemption under this
60 subsection shall immediately notify the department before ~~prior~~
61 ~~to~~ and at the end of the expiration of the exemption.

62 Section 14. Subsections (1) and (2) of section 324.0221,
63 Florida Statutes, are amended to read:

64 324.0221 Reports by insurers to the department; suspension
65 of driver license and vehicle registrations; reinstatement.-

66 (1) (a) Each insurer that has issued a policy providing
67 ~~personal injury protection coverage or property damage liability~~
68 coverage shall report the cancellation or nonrenewal thereof to
69 the department within 10 days after the processing date or



824756

70 effective date of each cancellation or nonrenewal. Upon the
71 issuance of a policy providing ~~personal injury protection~~
72 ~~coverage or property damage~~ liability coverage to a named
73 insured not previously insured by the insurer during that
74 calendar year, the insurer shall report the issuance of the new
75 policy to the department within 10 days. The report must ~~shall~~
76 be in the form ~~and format~~ and contain any information required
77 by the department and must be provided in a format that is
78 compatible with the data processing capabilities of the
79 department. Failure by an insurer to file proper reports with
80 the department as required by this subsection constitutes a
81 violation of the Florida Insurance Code. These records may ~~shall~~
82 be used by the department only for enforcement and regulatory
83 purposes, including the generation by the department of data
84 regarding compliance by owners of motor vehicles with the
85 requirements for financial responsibility coverage.

86 (b) With respect to an insurance policy providing ~~personal~~
87 ~~injury protection coverage or property damage~~ liability
88 coverage, each insurer shall notify the named insured, or the
89 first-named insured in the case of a commercial fleet policy, in
90 writing that any cancellation or nonrenewal of the policy will
91 be reported by the insurer to the department. The notice must
92 also inform the named insured that failure to maintain bodily
93 injury liability ~~personal injury protection~~ coverage and
94 property damage liability coverage on a motor vehicle when
95 required by law may result in the loss of registration and
96 driving privileges in this state and inform the named insured of
97 the amount of the reinstatement fees required by this section.
98 This notice is for informational purposes only, and an insurer



824756

99 is not civilly liable for failing to provide this notice.

100 (2) The department shall suspend, after due notice and an
101 opportunity to be heard, the registration and driver license of
102 any owner or registrant of a motor vehicle for ~~with respect to~~
103 which security is required under s. 324.022, s. 324.032, s.
104 627.7415, or s. 627.742 ~~ss. 324.022 and 627.733~~ upon:

105 (a) The department's records showing that the owner or
106 registrant of such motor vehicle did not have the ~~in full force~~
107 ~~and effect when~~ required security in full force and effect ~~that~~
108 ~~complies with the requirements of ss. 324.022 and 627.733;~~ or

109 (b) Notification by the insurer to the department, in a
110 form approved by the department, of cancellation or termination
111 of the required security.

112 Section 15. Section 324.0222, Florida Statutes, is created
113 to read:

114 324.0222 Application of suspensions for failure to maintain
115 security; reinstatement.—All suspensions for failure to maintain
116 required security as required by law in effect before January 1,
117 2022, remain in full force and effect after January 1, 2022. A
118 driver may reinstate a suspended driver license or registration
119 as provided under s. 324.0221.

120 Section 16. Section 324.023, Florida Statutes, is amended
121 to read:

122 324.023 Financial responsibility for bodily injury or
123 death.—In addition to any other financial responsibility
124 required by law, every owner or operator of a motor vehicle that
125 is required to be registered in this state, or that is located
126 within this state, and who, regardless of adjudication of guilt,
127 has been found guilty of or entered a plea of guilty or nolo



824756

128 | contendere to a charge of driving under the influence under s.
129 | 316.193 after October 1, 2007, shall, by one of the methods
130 | established in s. 324.031(1)(a) or (b) ~~s. 324.031(1) or (2)~~,
131 | establish and maintain the ability to respond in damages for
132 | liability on account of accidents arising out of the use of a
133 | motor vehicle in the amount of \$100,000 because of bodily injury
134 | to, or death of, one person in any one crash and, subject to
135 | such limits for one person, in the amount of \$300,000 because of
136 | bodily injury to, or death of, two or more persons in any one
137 | crash and in the amount of \$50,000 because of property damage in
138 | any one crash. If the owner or operator chooses to establish and
139 | maintain such ability by furnishing a certificate of deposit
140 | pursuant to s. 324.031(1)(b) ~~s. 324.031(2)~~, such certificate of
141 | deposit must be at least \$350,000. Such higher limits must be
142 | carried for a minimum period of 3 years. If the owner or
143 | operator has not been convicted of driving under the influence
144 | or a felony traffic offense for a period of 3 years from the
145 | date of reinstatement of driving privileges for a violation of
146 | s. 316.193, the owner or operator is ~~shall be~~ exempt from this
147 | section.

148 | Section 17. Section 324.031, Florida Statutes, is amended
149 | to read:

150 | 324.031 Manner of proving financial responsibility.-

151 | (1) ~~The owner or operator of a taxicab, limousine, jitney,~~
152 | ~~or any other for-hire passenger transportation vehicle may prove~~
153 | ~~financial responsibility by providing satisfactory evidence of~~
154 | ~~holding a motor vehicle liability policy as defined in s.~~
155 | ~~324.021(8) or s. 324.151, which policy is issued by an insurance~~
156 | ~~carrier which is a member of the Florida Insurance Guaranty~~



824756

157 ~~Association.~~ The operator or owner of a motor vehicle other than
158 a for-hire passenger transportation vehicle ~~any other vehicle~~
159 may prove his or her financial responsibility by:

160 (a) ~~(1)~~ Furnishing satisfactory evidence of holding a motor
161 vehicle liability policy as defined in ss. 324.021(8) and
162 324.151 which provides liability coverage for the motor vehicle
163 being operated;

164 (b) ~~(2)~~ Furnishing a certificate of self-insurance showing a
165 deposit of cash in accordance with s. 324.161; or

166 (c) ~~(3)~~ Furnishing a certificate of self-insurance issued by
167 the department in accordance with s. 324.171.

168 (2) Beginning January 1, 2022, any person, ~~including any~~
169 ~~firm, partnership, association, corporation, or other person,~~
170 ~~other than a natural person,~~ electing to use the method of proof
171 specified in paragraph (1)(b) subsection ~~(2)~~ shall do both of
172 the following:

173 (a) Furnish a certificate of deposit equal to the number of
174 vehicles owned times \$60,000 ~~\$30,000~~, up to a maximum of
175 \$240,000. ~~\$120,000.~~

176 (b) ~~In addition, any such person, other than a natural~~
177 ~~person, shall~~ Maintain insurance ~~providing~~ coverage that meets
178 the requirements of s. 324.151 and has limits of:

179 1. At least \$125,000 for bodily injury to, or the death of,
180 one person in any one crash and, subject to such limits for one
181 person, in the amount of \$250,000 for bodily injury to, or the
182 death of, two or more persons in any one crash; and \$50,000 for
183 damage to, or destruction of, property of others in any one
184 crash; or

185 2. At least \$300,000 for combined bodily injury liability



824756

186 ~~and property damage liability for any one crash in excess of~~
187 ~~limits of \$10,000/20,000/10,000 or \$30,000 combined single~~
188 ~~limits, and such excess insurance shall provide minimum limits~~
189 ~~of \$125,000/250,000/50,000 or \$300,000 combined single limits.~~
190 ~~These increased limits shall not affect the requirements for~~
191 ~~proving financial responsibility under s. 324.032(1).~~

192 Section 18. Section 324.032, Florida Statutes, is amended
193 to read:

194 324.032 ~~Manner of proving~~ Financial responsibility for
195 ~~for-hire passenger transportation vehicles. Notwithstanding the~~
196 ~~provisions of s. 324.031:~~

197 (1) An owner or a lessee of a for-hire passenger
198 transportation vehicle that is required to be registered in this
199 state shall establish and continuously maintain the ability to
200 respond in damages for liability on account of accidents arising
201 out of the ownership, maintenance, or use of the for-hire
202 passenger transportation vehicle, in the amount of:

203 (a) One hundred twenty-five thousand dollars for bodily
204 injury to, or the death of, one person in any one crash and,
205 subject to such limits for one person, in the amount of \$250,000
206 for bodily injury to, or the death of, two or more persons in
207 any one crash; and ~~A person who is either the owner or a lessee~~
208 ~~required to maintain insurance under s. 627.733(1)(b) and who~~
209 ~~operates one or more taxicabs, limousines, jitneys, or any other~~
210 ~~for-hire passenger transportation vehicles may prove financial~~
211 ~~responsibility by furnishing satisfactory evidence of holding a~~
212 ~~motor vehicle liability policy, but with minimum limits of~~
213 ~~\$125,000/250,000/50,000.~~

214 (b) Fifty thousand dollars for damage to, or destruction



824756

215 ~~of, property of others in any one crash~~ ~~A person who is either~~
216 ~~the owner or a lessee required to maintain insurance under s.~~
217 ~~324.021(9) (b) and who operates limousines, jitneys, or any other~~
218 ~~for-hire passenger vehicles, other than taxicabs, may prove~~
219 ~~financial responsibility by furnishing satisfactory evidence of~~
220 ~~holding a motor vehicle liability policy as defined in s.~~
221 ~~324.031.~~

222 (2) Except as provided in subsection (3), the requirements
223 of this section must be met by the owner or lessee providing
224 satisfactory evidence of holding a motor vehicle liability
225 policy conforming to the requirements of s. 324.151 which is
226 issued by an insurance carrier that is a member of the Florida
227 Insurance Guaranty Association.

228 (3) ~~(2)~~ ~~An owner or a lessee who is required to maintain~~
229 ~~insurance under s. 324.021(9) (b) and who operates at least 300~~
230 ~~taxicabs, limousines, jitneys, or any other for-hire passenger~~
231 ~~transportation vehicles may provide financial responsibility by~~
232 ~~complying with the provisions of s. 324.171, which must such~~
233 ~~compliance to be demonstrated by maintaining at its principal~~
234 ~~place of business an audited financial statement, prepared in~~
235 ~~accordance with generally accepted accounting principles, and~~
236 ~~providing to the department a certification issued by a~~
237 ~~certified public accountant that the applicant's net worth is at~~
238 ~~least equal to the requirements of s. 324.171 as determined by~~
239 ~~the Office of Insurance Regulation of the Financial Services~~
240 ~~Commission, including claims liabilities in an amount certified~~
241 ~~as adequate by a Fellow of the Casualty Actuarial Society.~~

242
243 Upon request by the department, the applicant shall ~~must~~ provide



824756

244 the department at the applicant's principal place of business in
245 this state access to the applicant's underlying financial
246 information and financial statements that provide the basis of
247 the certified public accountant's certification. The applicant
248 shall reimburse the requesting department for all reasonable
249 costs incurred by it in reviewing the supporting information.
250 The maximum amount of self-insurance permissible under this
251 subsection is \$300,000 and must be stated on a per-occurrence
252 basis, and the applicant shall maintain adequate excess
253 insurance issued by an authorized or eligible insurer licensed
254 or approved by the Office of Insurance Regulation. All risks
255 self-insured shall remain with the owner or lessee providing it,
256 and the risks are not transferable to any other person, unless a
257 policy complying with subsections (1) and (2) ~~subsection (1)~~ is
258 obtained.

259 Section 19. Subsection (2) of section 324.051, Florida
260 Statutes, is amended, and subsection (4) is added to that
261 section, to read:

262 324.051 Reports of crashes; suspensions of licenses and
263 registrations.—

264 (2) (a) Thirty days after receipt of notice of any accident
265 described in paragraph (1) (a) involving a motor vehicle within
266 this state, the department shall suspend, after due notice and
267 opportunity to be heard, the license of each operator and all
268 registrations of the owner of the vehicles operated by such
269 operator whether or not involved in such crash and, in the case
270 of a nonresident owner or operator, shall suspend such
271 nonresident's operating privilege in this state, unless such
272 operator or owner shall, prior to the expiration of such 30



824756

273 days, be found by the department to be exempt from the operation
274 of this chapter, based upon evidence satisfactory to the
275 department that:

276 1. The motor vehicle was legally parked at the time of such
277 crash.

278 2. The motor vehicle was owned by the United States
279 Government, this state, or any political subdivision of this
280 state or any municipality therein.

281 3. Such operator or owner has secured a duly acknowledged
282 written agreement providing for release from liability by all
283 parties injured as the result of said crash and has complied
284 with one of the provisions of s. 324.031.

285 4. Such operator or owner has deposited with the department
286 security to conform with s. 324.061 when applicable and has
287 complied with one of the provisions of s. 324.031.

288 5. One year has elapsed since such owner or operator was
289 suspended pursuant to subsection (3), the owner or operator has
290 complied with one of the provisions of s. 324.031, and no bill
291 of complaint of which the department has notice has been filed
292 in a court of competent jurisdiction.

293 (b) This subsection does ~~shall~~ not apply:

294 1. To such operator or owner if such operator or owner had
295 in effect at the time of such crash or traffic conviction a
296 motor vehicle ~~an automobile~~ liability policy with respect to all
297 of the registered motor vehicles owned by such operator or
298 owner.

299 2. To such operator, if not the owner of such motor
300 vehicle, if there was in effect at the time of such crash or
301 traffic conviction a motor vehicle ~~an automobile~~ liability



824756

302 policy or bond with respect to his or her operation of motor
303 vehicles not owned by him or her.

304 3. To such operator or owner if the liability of such
305 operator or owner for damages resulting from such crash is, in
306 the judgment of the department, covered by any other form of
307 liability insurance or bond.

308 4. To any person who has obtained from the department a
309 certificate of self-insurance, in accordance with s. 324.171, or
310 to any person operating a motor vehicle for such self-insurer.

311
312 No such policy or bond shall be effective under this subsection
313 unless it contains limits of not less than those specified in s.
314 324.021(7).

315 (4) As used in this section, the term "motor vehicle"
316 includes a motorcycle as defined in s. 320.01(26).

317 Section 20. Section 324.071, Florida Statutes, is amended
318 to read:

319 324.071 Reinstatement; renewal of license; reinstatement
320 fee.—~~An Any~~ operator or owner whose license or registration has
321 been suspended pursuant to s. 324.051(2), s. 324.072, s.
322 324.081, or s. 324.121 may effect its reinstatement upon
323 compliance with ~~the provisions of~~ s. 324.051(2)(a)3. or 4., or
324 s. 324.081(2) and (3), as the case may be, and with one of the
325 provisions of s. 324.031 and upon payment to the department of a
326 nonrefundable reinstatement fee of \$15. Only one such fee may
327 ~~shall~~ be paid by any one person regardless irrespective of the
328 number of licenses and registrations to be then reinstated or
329 issued to such person. ~~All~~ Such fees must ~~shall~~ be deposited to
330 a department trust fund. ~~If~~ When the reinstatement of any



824756

331 license or registration is effected by compliance with s.
332 324.051(2)(a)3. or 4., the department may ~~shall~~ not renew the
333 license or registration within ~~a period of~~ 3 years after ~~from~~
334 such reinstatement, nor may ~~shall~~ any other license or
335 registration be issued in the name of such person, unless the
336 operator continues ~~is continuing~~ to comply with ~~one of the~~
337 ~~provisions of~~ s. 324.031.

338 Section 21. Subsection (1) of section 324.091, Florida
339 Statutes, is amended to read:

340 324.091 Notice to department; notice to insurer.-

341 (1) Each owner and operator involved in a crash or
342 conviction case within the purview of this chapter shall furnish
343 evidence of ~~automobile liability insurance or~~ motor vehicle
344 liability insurance within 14 days after the date of the mailing
345 of notice of crash by the department in the form and manner as
346 it may designate. Upon receipt of evidence that a ~~an automobile~~
347 ~~liability policy or~~ motor vehicle liability policy was in effect
348 at the time of the crash or conviction case, the department
349 shall forward to the insurer such information for verification
350 in a method as determined by the department. The insurer shall
351 respond to the department within 20 days after the notice as to
352 whether ~~or not~~ such information is valid. If the department
353 determines that a ~~an automobile liability policy or~~ motor
354 vehicle liability policy was not in effect and did not provide
355 coverage for both the owner and the operator, it must ~~shall~~ take
356 action as it is authorized to do under this chapter.

357 Section 22. Section 324.151, Florida Statutes, is amended
358 to read:

359 324.151 Motor vehicle liability policies; required



824756

360 provisions.-

361 (1) A motor vehicle liability policy that serves as to be
362 proof of financial responsibility under s. 324.031(1)(a) must s-
363 324.031(1), shall be issued to owners or operators of motor
364 vehicles under the following provisions:

365 (a) A motor vehicle An owner's liability insurance policy
366 issued to an owner of a motor vehicle required to be registered
367 in this state must shall designate by explicit description or by
368 appropriate reference all motor vehicles for with respect to
369 which coverage is thereby granted. The policy must and shall
370 insure the person or persons owner named therein and, except for
371 a named driver excluded pursuant to s. 627.747, must insure any
372 resident relative of a named insured other person as operator
373 using such motor vehicle or motor vehicles with the express or
374 implied permission of such owner against loss from the liability
375 imposed by law for damage arising out of the ownership,
376 maintenance, or use of any such motor vehicle or motor vehicles
377 within the United States or the Dominion of Canada, subject to
378 limits, exclusive of interest and costs with respect to each
379 such motor vehicle as is provided for under s. 324.021(7).
380 Except for a named driver excluded pursuant to s. 627.747, the
381 policy must also insure any person operating an insured motor
382 vehicle with the express or implied permission of a named
383 insured against loss from the liability imposed by law for
384 damage arising out of the use of any vehicle. However, the
385 insurer may include provisions in its policy excluding liability
386 coverage for a motor vehicle not designated as an insured
387 vehicle on the policy if such motor vehicle does not qualify as
388 a newly acquired vehicle or as a temporary substitute vehicle



824756

389 and was owned by the insured or was furnished for an insured's
390 regular use for more than 30 consecutive days before the event
391 giving rise to the claim. Insurers may make available, with
392 respect to property damage liability coverage, a deductible
393 amount not to exceed \$500. In the event of a property damage
394 loss covered by a policy containing a property damage deductible
395 provision, the insurer shall pay to the third-party claimant the
396 amount of any property damage liability settlement or judgment,
397 subject to policy limits, as if no deductible existed.

398 (b) A motor vehicle liability insurance policy issued to a
399 person who does not own a motor vehicle must ~~An operator's motor~~
400 ~~vehicle liability policy of insurance shall~~ insure the person or
401 persons named therein against loss from the liability imposed
402 ~~upon him or her~~ by law for damages arising out of the use ~~by the~~
403 ~~person~~ of any motor vehicle not owned by him or her, ~~with the~~
404 ~~same territorial limits and subject to the same limits of~~
405 ~~liability as referred to above with respect to an owner's policy~~
406 ~~of liability insurance.~~

407 (c) All such motor vehicle liability policies must provide
408 liability coverage with limits, exclusive of interest and costs,
409 as specified under s. 324.021(7) for accidents occurring within
410 the United States or Canada. The policies must ~~shall~~ state the
411 name and address of the named insured, the coverage afforded by
412 the policy, the premium charged therefor, the policy period, and
413 the limits of liability, and must ~~shall~~ contain an agreement or
414 be endorsed that insurance is provided in accordance with the
415 coverage defined in this chapter ~~as respects bodily injury and~~
416 ~~death or property damage or both~~ and is subject to all
417 ~~provisions of this chapter. The said policies must shall~~ also



824756

418 contain a provision that the satisfaction by an insured of a
419 judgment for such injury or damage may ~~shall~~ not be a condition
420 precedent to the right or duty of the insurance carrier to make
421 payment on account of such injury or damage, and must ~~shall~~ also
422 contain a provision that bankruptcy or insolvency of the insured
423 or of the insured's estate does ~~shall~~ not relieve the insurance
424 carrier of any of its obligations under the ~~said~~ policy.

425 (2) ~~The provisions of~~ This section is ~~shall~~ not be
426 applicable to any motor vehicle ~~automobile~~ liability policy
427 unless and until it is furnished as proof of financial
428 responsibility for the future pursuant to s. 324.031, and then
429 applies only from ~~and after~~ the date the ~~said~~ policy is ~~so~~
430 furnished.

431 (3) As used in this section, the term:

432 (a) "Newly acquired vehicle" means a vehicle owned by a
433 named insured or resident relative of the named insured which
434 was acquired no more than 30 days before an accident.

435 (b) "Resident relative" means a person related to a named
436 insured by any degree by blood, marriage, or adoption, including
437 a ward or foster child, who usually makes his or her home in the
438 same family unit or residence as the named insured, regardless
439 of whether he or she temporarily lives elsewhere.

440 (c) "Temporary substitute vehicle" means any motor vehicle
441 as defined in s. 320.01(1) which is not owned by the named
442 insured and which is temporarily used with the permission of the
443 owner as a substitute for the owned motor vehicle designated on
444 the policy when the owned vehicle is withdrawn from normal use
445 because of breakdown, repair, servicing, loss, or destruction.

446 Section 23. Section 324.161, Florida Statutes, is amended



824756

447 to read:

448 324.161 Proof of financial responsibility; deposit.—If a
449 person elects to prove his or her financial responsibility under
450 the method of proof specified in s. 324.031(1) (b), he or she
451 annually must obtain and submit to the department proof of a
452 certificate of deposit in the amount required under s.
453 324.031(2) from a financial institution insured by the Federal
454 Deposit Insurance Corporation or the National Credit Union
455 Administration ~~Annually, before any certificate of insurance may~~
456 ~~be issued to a person, including any firm, partnership,~~
457 ~~association, corporation, or other person, other than a natural~~
458 ~~person, proof of a certificate of deposit of \$30,000 issued and~~
459 ~~held by a financial institution must be submitted to the~~
460 ~~department. A power of attorney will be issued to and held by~~
461 ~~the department and may be executed upon a judgment issued~~
462 ~~against such person making the deposit, for damages for ~~because~~~~
463 ~~of bodily injury to or death of any person or for damages for~~
464 ~~because of injury to or destruction of property resulting from~~
465 ~~the use or operation of any motor vehicle occurring after such~~
466 ~~deposit was made. Money so deposited is ~~shall~~ not ~~be~~ subject to~~
467 ~~attachment or execution unless such attachment or execution~~
468 ~~arises ~~shall arise~~ out of a lawsuit ~~suit~~ for such damages as~~
469 ~~aforesaid.~~

470 Section 24. Subsections (1) and (2) of section 324.171,
471 Florida Statutes, are amended to read:

472 324.171 Self-insurer.—

473 (1) A ~~Any~~ person may qualify as a self-insurer by obtaining
474 a certificate of self-insurance from the department. ~~which may,~~
475 ~~in its discretion and~~ Upon application of such a person, the



824756

476 department may issue a said certificate of self-insurance to an
477 applicant who satisfies ~~when such person has satisfied~~ the
478 requirements of this section. Effective January 1, 2022 to
479 ~~qualify as a self-insurer under this section:~~

480 (a) A private individual with private passenger vehicles
481 shall possess a net unencumbered worth of at least \$100,000
482 ~~\$40,000~~.

483 (b) A person, including any firm, partnership, association,
484 corporation, or other person, other than a natural person,
485 shall:

486 1. Possess a net unencumbered worth of at least \$100,000
487 ~~\$40,000~~ for the first motor vehicle and \$50,000 ~~\$20,000~~ for each
488 additional motor vehicle; or

489 2. Maintain sufficient net worth, in an amount determined
490 by the department, to be financially responsible for potential
491 losses. The department annually shall determine the minimum net
492 worth sufficient to satisfy this subparagraph as determined
493 ~~annually by the department,~~ pursuant to rules adopted
494 ~~promulgated~~ by the department, with the assistance of the Office
495 of Insurance Regulation of the Financial Services Commission, ~~to~~
496 ~~be financially responsible for potential losses.~~ The rules must
497 consider any shall take into consideration excess insurance
498 carried by the applicant. The department's determination must
499 ~~shall~~ be based upon reasonable actuarial principles considering
500 the frequency, severity, and loss development of claims incurred
501 by casualty insurers writing coverage on the type of motor
502 vehicles for which a certificate of self-insurance is desired.

503 (c) The owner of a commercial motor vehicle, as defined in
504 s. 207.002 or s. 320.01, may qualify as a self-insurer subject



824756

505 to the standards provided ~~for~~ in subparagraph (b)2.

506 (2) The self-insurance certificate must ~~shall~~ provide
507 limits of liability insurance in the amounts specified under s.
508 324.021(7) ~~or s. 627.7415 and shall provide personal injury~~
509 ~~protection coverage under s. 627.733(3)(b).~~

510 Section 25. Section 324.251, Florida Statutes, is amended
511 to read:

512 324.251 Short title.—This chapter may be cited as the
513 “Financial Responsibility Law of 2021 ~~1955~~” and is ~~shall become~~
514 effective at 12:01 a.m., January 1, 2022 ~~October 1, 1955~~.

515 Section 26. Subsection (4) of section 400.9905, Florida
516 Statutes, is amended to read:

517 400.9905 Definitions.—

518 (4) (a) “Clinic” means an entity where health care services
519 are provided to individuals and which tenders charges for
520 reimbursement for such services, including a mobile clinic and a
521 portable equipment provider. As used in this part, the term does
522 not include and the licensure requirements of this part do not
523 apply to:

524 1. ~~(a)~~ Entities licensed or registered by the state under
525 chapter 395; entities licensed or registered by the state and
526 providing only health care services within the scope of services
527 authorized under their respective licenses under ss. 383.30-
528 383.332, chapter 390, chapter 394, chapter 397, this chapter
529 except part X, chapter 429, chapter 463, chapter 465, chapter
530 466, chapter 478, chapter 484, or chapter 651; end-stage renal
531 disease providers authorized under 42 C.F.R. part 494; providers
532 certified and providing only health care services within the
533 scope of services authorized under their respective



824756

534 certifications under 42 C.F.R. part 485, subpart B, subpart H,
535 or subpart J; providers certified and providing only health care
536 services within the scope of services authorized under their
537 respective certifications under 42 C.F.R. part 486, subpart C;
538 providers certified and providing only health care services
539 within the scope of services authorized under their respective
540 certifications under 42 C.F.R. part 491, subpart A; providers
541 certified by the Centers for Medicare and Medicaid Services
542 under the federal Clinical Laboratory Improvement Amendments and
543 the federal rules adopted thereunder; or any entity that
544 provides neonatal or pediatric hospital-based health care
545 services or other health care services by licensed practitioners
546 solely within a hospital licensed under chapter 395.

547 2.~~(b)~~ Entities that own, directly or indirectly, entities
548 licensed or registered by the state pursuant to chapter 395;
549 entities that own, directly or indirectly, entities licensed or
550 registered by the state and providing only health care services
551 within the scope of services authorized pursuant to their
552 respective licenses under ss. 383.30-383.332, chapter 390,
553 chapter 394, chapter 397, this chapter except part X, chapter
554 429, chapter 463, chapter 465, chapter 466, chapter 478, chapter
555 484, or chapter 651; end-stage renal disease providers
556 authorized under 42 C.F.R. part 494; providers certified and
557 providing only health care services within the scope of services
558 authorized under their respective certifications under 42 C.F.R.
559 part 485, subpart B, subpart H, or subpart J; providers
560 certified and providing only health care services within the
561 scope of services authorized under their respective
562 certifications under 42 C.F.R. part 486, subpart C; providers



824756

563 certified and providing only health care services within the
564 scope of services authorized under their respective
565 certifications under 42 C.F.R. part 491, subpart A; providers
566 certified by the Centers for Medicare and Medicaid Services
567 under the federal Clinical Laboratory Improvement Amendments and
568 the federal rules adopted thereunder; or any entity that
569 provides neonatal or pediatric hospital-based health care
570 services by licensed practitioners solely within a hospital
571 licensed under chapter 395.

572 3.(e) Entities that are owned, directly or indirectly, by
573 an entity licensed or registered by the state pursuant to
574 chapter 395; entities that are owned, directly or indirectly, by
575 an entity licensed or registered by the state and providing only
576 health care services within the scope of services authorized
577 pursuant to their respective licenses under ss. 383.30-383.332,
578 chapter 390, chapter 394, chapter 397, this chapter except part
579 X, chapter 429, chapter 463, chapter 465, chapter 466, chapter
580 478, chapter 484, or chapter 651; end-stage renal disease
581 providers authorized under 42 C.F.R. part 494; providers
582 certified and providing only health care services within the
583 scope of services authorized under their respective
584 certifications under 42 C.F.R. part 485, subpart B, subpart H,
585 or subpart J; providers certified and providing only health care
586 services within the scope of services authorized under their
587 respective certifications under 42 C.F.R. part 486, subpart C;
588 providers certified and providing only health care services
589 within the scope of services authorized under their respective
590 certifications under 42 C.F.R. part 491, subpart A; providers
591 certified by the Centers for Medicare and Medicaid Services



824756

592 under the federal Clinical Laboratory Improvement Amendments and
593 the federal rules adopted thereunder; or any entity that
594 provides neonatal or pediatric hospital-based health care
595 services by licensed practitioners solely within a hospital
596 under chapter 395.

597 4.~~(d)~~ Entities that are under common ownership, directly
598 or indirectly, with an entity licensed or registered by the
599 state pursuant to chapter 395; entities that are under common
600 ownership, directly or indirectly, with an entity licensed or
601 registered by the state and providing only health care services
602 within the scope of services authorized pursuant to their
603 respective licenses under ss. 383.30-383.332, chapter 390,
604 chapter 394, chapter 397, this chapter except part X, chapter
605 429, chapter 463, chapter 465, chapter 466, chapter 478, chapter
606 484, or chapter 651; end-stage renal disease providers
607 authorized under 42 C.F.R. part 494; providers certified and
608 providing only health care services within the scope of services
609 authorized under their respective certifications under 42 C.F.R.
610 part 485, subpart B, subpart H, or subpart J; providers
611 certified and providing only health care services within the
612 scope of services authorized under their respective
613 certifications under 42 C.F.R. part 486, subpart C; providers
614 certified and providing only health care services within the
615 scope of services authorized under their respective
616 certifications under 42 C.F.R. part 491, subpart A; providers
617 certified by the Centers for Medicare and Medicaid Services
618 under the federal Clinical Laboratory Improvement Amendments and
619 the federal rules adopted thereunder; or any entity that
620 provides neonatal or pediatric hospital-based health care



824756

621 services by licensed practitioners solely within a hospital
622 licensed under chapter 395.

623 5.~~(e)~~ An entity that is exempt from federal taxation under
624 26 U.S.C. s. 501(c)(3) or (4), an employee stock ownership plan
625 under 26 U.S.C. s. 409 that has a board of trustees at least
626 two-thirds of which are Florida-licensed health care
627 practitioners and provides only physical therapy services under
628 physician orders, any community college or university clinic,
629 and any entity owned or operated by the federal or state
630 government, including agencies, subdivisions, or municipalities
631 thereof.

632 6.~~(f)~~ A sole proprietorship, group practice, partnership,
633 or corporation that provides health care services by physicians
634 covered by s. 627.419, that is directly supervised by one or
635 more of such physicians, and that is wholly owned by one or more
636 of those physicians or by a physician and the spouse, parent,
637 child, or sibling of that physician.

638 7.~~(g)~~ A sole proprietorship, group practice, partnership,
639 or corporation that provides health care services by licensed
640 health care practitioners under chapter 457, chapter 458,
641 chapter 459, chapter 460, chapter 461, chapter 462, chapter 463,
642 chapter 466, chapter 467, chapter 480, chapter 484, chapter 486,
643 chapter 490, chapter 491, or part I, part III, part X, part
644 XIII, or part XIV of chapter 468, or s. 464.012, and that is
645 wholly owned by one or more licensed health care practitioners,
646 or the licensed health care practitioners set forth in this
647 subparagraph ~~paragraph~~ and the spouse, parent, child, or sibling
648 of a licensed health care practitioner if one of the owners who
649 is a licensed health care practitioner is supervising the



824756

650 business activities and is legally responsible for the entity's
651 compliance with all federal and state laws. However, a health
652 care practitioner may not supervise services beyond the scope of
653 the practitioner's license, except that, for the purposes of
654 this part, a clinic owned by a licensee in s. 456.053(3)(b)
655 which provides only services authorized pursuant to s.
656 456.053(3)(b) may be supervised by a licensee specified in s.
657 456.053(3)(b).

658 8.~~(h)~~ Clinical facilities affiliated with an accredited
659 medical school at which training is provided for medical
660 students, residents, or fellows.

661 9.~~(i)~~ Entities that provide only oncology or radiation
662 therapy services by physicians licensed under chapter 458 or
663 chapter 459 or entities that provide oncology or radiation
664 therapy services by physicians licensed under chapter 458 or
665 chapter 459 which are owned by a corporation whose shares are
666 publicly traded on a recognized stock exchange.

667 10.~~(j)~~ Clinical facilities affiliated with a college of
668 chiropractic accredited by the Council on Chiropractic Education
669 at which training is provided for chiropractic students.

670 11.~~(k)~~ Entities that provide licensed practitioners to
671 staff emergency departments or to deliver anesthesia services in
672 facilities licensed under chapter 395 and that derive at least
673 90 percent of their gross annual revenues from the provision of
674 such services. Entities claiming an exemption from licensure
675 under this subparagraph ~~paragraph~~ must provide documentation
676 demonstrating compliance.

677 12.~~(l)~~ Orthotic, prosthetic, pediatric cardiology, or
678 perinatology clinical facilities or anesthesia clinical



824756

679 facilities that are not otherwise exempt under subparagraph 1.
680 or subparagraph 11. ~~paragraph (a) or paragraph (k)~~ and that are
681 a publicly traded corporation or are wholly owned, directly or
682 indirectly, by a publicly traded corporation. As used in this
683 subparagraph ~~paragraph~~, a publicly traded corporation is a
684 corporation that issues securities traded on an exchange
685 registered with the United States Securities and Exchange
686 Commission as a national securities exchange.

687 13. ~~(m)~~ Entities that are owned by a corporation that has
688 \$250 million or more in total annual sales of health care
689 services provided by licensed health care practitioners where
690 one or more of the persons responsible for the operations of the
691 entity is a health care practitioner who is licensed in this
692 state and who is responsible for supervising the business
693 activities of the entity and is responsible for the entity's
694 compliance with state law for purposes of this part.

695 14. ~~(n)~~ Entities that employ 50 or more licensed health care
696 practitioners licensed under chapter 458 or chapter 459 where
697 the billing for medical services is under a single tax
698 identification number. The application for exemption under this
699 subsection must include ~~shall contain information that includes:~~
700 the name, residence, and business address and telephone ~~phone~~
701 number of the entity that owns the practice; a complete list of
702 the names and contact information of all the officers and
703 directors of the corporation; the name, residence address,
704 business address, and medical license number of each licensed
705 Florida health care practitioner employed by the entity; the
706 corporate tax identification number of the entity seeking an
707 exemption; a listing of health care services to be provided by



824756

708 the entity at the health care clinics owned or operated by the
709 entity; and a certified statement prepared by an independent
710 certified public accountant which states that the entity and the
711 health care clinics owned or operated by the entity have not
712 received payment for health care services under medical payments
713 ~~personal injury protection insurance~~ coverage for the preceding
714 year. If the agency determines that an entity that ~~which~~ is
715 exempt under this subsection has received payments for medical
716 services under medical payments ~~personal injury protection~~
717 ~~insurance~~ coverage, the agency may deny or revoke the exemption
718 from licensure under this subsection.

719 15. ~~(e)~~ Entities that are, directly or indirectly, under the
720 common ownership of or that are subject to common control by a
721 mutual insurance holding company, as defined in s. 628.703, with
722 an entity issued a certificate of authority under chapter 624 or
723 chapter 641 which has \$1 billion or more in total annual sales
724 in this state.

725 16. ~~(p)~~ Entities that are owned by an entity that is a
726 behavioral health care service provider in at least five other
727 states; that, together with its affiliates, have \$90 million or
728 more in total annual revenues associated with the provision of
729 behavioral health care services; and wherein one or more of the
730 persons responsible for the operations of the entity is a health
731 care practitioner who is licensed in this state, who is
732 responsible for supervising the business activities of the
733 entity, and who is responsible for the entity's compliance with
734 state law for purposes of this part.

735 17. ~~(q)~~ Medicaid providers.

736 (b) Notwithstanding paragraph (a) ~~this subsection~~, an



824756

737 entity is shall be deemed a clinic and must be licensed under
738 this part in order to receive medical payments coverage
739 reimbursement under s. 627.7265 unless the entity is:
740 1. Wholly owned by a physician licensed under chapter 458
741 or chapter 459 or by the physician and the spouse, parent,
742 child, or sibling of the physician;
743 2. Wholly owned by a dentist licensed under chapter 466 or
744 by the dentist and the spouse, parent, child, or sibling of the
745 dentist;
746 3. Wholly owned by a chiropractic physician licensed under
747 chapter 460 or by the chiropractic physician and the spouse,
748 parent, child, or sibling of the chiropractic physician;
749 4. A hospital or ambulatory surgical center licensed under
750 chapter 395;
751 5. An entity that wholly owns or is wholly owned, directly
752 or indirectly, by a hospital or hospitals licensed under chapter
753 395;
754 6. A clinical facility affiliated with an accredited
755 medical school at which training is provided for medical
756 students, residents, or fellows;
757 7. Certified under 42 C.F.R. part 485, subpart H; or
758 8. Owned by a publicly traded corporation, either directly
759 or indirectly through its subsidiaries, which has \$250 million
760 or more in total annual sales of health care services provided
761 by licensed health care practitioners, if one or more of the
762 persons responsible for the operations of the entity are health
763 care practitioners who are licensed in this state and are
764 responsible for supervising the business activities of the
765 entity and the entity's compliance with state law for purposes



824756

766 ~~of this subsection the Florida Motor Vehicle No-Fault Law, ss.~~
767 ~~627.730-627.7405, unless exempted under s. 627.736(5)(h).~~

768 Section 27. Subsection (5) of section 400.991, Florida
769 Statutes, is amended to read:

770 400.991 License requirements; background screenings;
771 prohibitions.—

772 (5) All agency forms for licensure application or exemption
773 from licensure under this part must contain the following
774 statement:

775

776 INSURANCE FRAUD NOTICE.—A person commits a fraudulent insurance
777 act, as defined in s. 626.989, Florida Statutes, if the person

778 ~~who~~ knowingly submits a false, misleading, or fraudulent
779 application or other document when applying for licensure as a
780 health care clinic, seeking an exemption from licensure as a
781 health care clinic, or demonstrating compliance with part X of
782 chapter 400, Florida Statutes, with the intent to use the
783 license, exemption from licensure, or demonstration of

784 compliance to provide services or seek reimbursement under a
785 motor vehicle liability insurance policy's medical payments

786 coverage ~~the Florida Motor Vehicle No-Fault Law, commits a~~
787 ~~fraudulent insurance act, as defined in s. 626.989, Florida~~

788 ~~Statutes.~~ A person who presents a claim for benefits under
789 medical payments coverage ~~personal injury protection benefits~~

790 knowing that the payee knowingly submitted such health care
791 clinic application or document, commits insurance fraud, as
792 defined in s. 817.234, Florida Statutes.

793 Section 28. Paragraph (g) of subsection (1) of section
794 400.9935, Florida Statutes, is amended to read:



824756

795 400.9935 Clinic responsibilities.-

796 (1) Each clinic shall appoint a medical director or clinic
797 director who shall agree in writing to accept legal
798 responsibility for the following activities on behalf of the
799 clinic. The medical director or the clinic director shall:

800 (g) Conduct systematic reviews of clinic billings to ensure
801 that the billings are not fraudulent or unlawful. Upon discovery
802 of an unlawful charge, the medical director or clinic director
803 shall take immediate corrective action. If the clinic performs
804 only the technical component of magnetic resonance imaging,
805 static radiographs, computed tomography, or positron emission
806 tomography, and provides the professional interpretation of such
807 services, in a fixed facility that is accredited by a national
808 accrediting organization that is approved by the Centers for
809 Medicare and Medicaid Services for magnetic resonance imaging
810 and advanced diagnostic imaging services and if, in the
811 preceding quarter, the percentage of scans performed by that
812 clinic which was billed to motor vehicle ~~all personal injury~~
813 ~~protection~~ insurance carriers under medical payments coverage
814 was less than 15 percent, the chief financial officer of the
815 clinic may, in a written acknowledgment provided to the agency,
816 assume the responsibility for the conduct of the systematic
817 reviews of clinic billings to ensure that the billings are not
818 fraudulent or unlawful.

819 Section 29. Subsection (28) of section 409.901, Florida
820 Statutes, is amended to read:

821 409.901 Definitions; ss. 409.901-409.920.-As used in ss.
822 409.901-409.920, except as otherwise specifically provided, the
823 term:



824756

824 (28) "Third-party benefit" means any benefit that is or may
825 be available at any time through contract, court award,
826 judgment, settlement, agreement, or any arrangement between a
827 third party and any person or entity, including, without
828 limitation, a Medicaid recipient, a provider, another third
829 party, an insurer, or the agency, for any Medicaid-covered
830 injury, illness, goods, or services, including costs of medical
831 services related thereto, for bodily ~~personal~~ injury or for
832 death of the recipient, but specifically excluding ~~policies of~~
833 life insurance policies on the recipient, unless available under
834 terms of the policy to pay medical expenses before ~~prior to~~
835 death. The term includes, without limitation, collateral, as
836 defined in this section; ~~health insurance;~~ any benefit under a
837 health maintenance organization, a preferred provider
838 arrangement, a prepaid health clinic, liability insurance,
839 uninsured motorist insurance, or medical payments coverage; or
840 ~~personal injury protection coverage,~~ medical benefits under
841 workers' compensation, and any obligation under law or equity to
842 provide medical support.

843 Section 30. Paragraph (f) of subsection (11) of section
844 409.910, Florida Statutes, is amended to read:

845 409.910 Responsibility for payments on behalf of Medicaid-
846 eligible persons when other parties are liable.-

847 (11) The agency may, as a matter of right, in order to
848 enforce its rights under this section, institute, intervene in,
849 or join any legal or administrative proceeding in its own name
850 in one or more of the following capacities: individually, as
851 subrogee of the recipient, as assignee of the recipient, or as
852 lienholder of the collateral.



824756

853 (f) Notwithstanding any provision in this section to the
854 contrary, in the event of an action in tort against a third
855 party in which the recipient or his or her legal representative
856 is a party which results in a judgment, award, or settlement
857 from a third party, the amount recovered shall be distributed as
858 follows:

859 1. After attorney ~~attorney's~~ fees and taxable costs as
860 defined by the Florida Rules of Civil Procedure, one-half of the
861 remaining recovery shall be paid to the agency up to the total
862 amount of medical assistance provided by Medicaid.

863 2. The remaining amount of the recovery shall be paid to
864 the recipient.

865 3. For purposes of calculating the agency's recovery of
866 medical assistance benefits paid, the fee for services of an
867 attorney retained by the recipient or his or her legal
868 representative shall be calculated at 25 percent of the
869 judgment, award, or settlement.

870 4. Notwithstanding any other provision of this section to
871 the contrary, the agency shall be entitled to all medical
872 coverage benefits up to the total amount of medical assistance
873 provided by Medicaid. For purposes of this paragraph, the term
874 "medical coverage" means any benefits under health insurance, a
875 health maintenance organization, a preferred provider
876 arrangement, or a prepaid health clinic, and the portion of
877 benefits designated for medical payments under ~~coverage for~~
878 workers' compensation coverage, motor vehicle insurance
879 coverage, personal injury protection, and casualty coverage.

880 Section 31. Paragraph (k) of subsection (2) of section
881 456.057, Florida Statutes, is amended to read:



824756

882 456.057 Ownership and control of patient records; report or
883 copies of records to be furnished; disclosure of information.—

884 (2) As used in this section, the terms "records owner,"
885 "health care practitioner," and "health care practitioner's
886 employer" do not include any of the following persons or
887 entities; furthermore, the following persons or entities are not
888 authorized to acquire or own medical records, but are authorized
889 under the confidentiality and disclosure requirements of this
890 section to maintain those documents required by the part or
891 chapter under which they are licensed or regulated:

892 (k) Persons or entities practicing under s. 627.7265 ~~s.~~
893 ~~627.736(7)~~.

894 Section 32. Paragraphs (ee) and (ff) of subsection (1) of
895 section 456.072, Florida Statutes, are amended to read:

896 456.072 Grounds for discipline; penalties; enforcement.—

897 (1) The following acts shall constitute grounds for which
898 the disciplinary actions specified in subsection (2) may be
899 taken:

900 (ee) With respect to making a medical payments coverage
901 personal injury protection claim under s. 627.7265 as required
902 by s. 627.736, intentionally submitting a claim, statement, or
903 bill that has been upcoded. As used in this paragraph, the term
904 "upcoded" means an action that submits a billing code that would
905 result in a greater payment amount than would be paid using a
906 billing code that accurately describes the services performed.
907 The term does not include an otherwise lawful bill by a magnetic
908 resonance imaging facility which globally combines both
909 technical and professional components, if the amount of the
910 global bill is not more than the components if billed



824756

911 separately; however, payment of such a bill constitutes payment
912 in full for all components of such service ~~“un-coded” as defined~~
913 ~~in s. 627.732.~~

914 (ff) With respect to making a medical payments coverage
915 ~~personal injury protection~~ claim pursuant to s. 627.7265 ~~as~~
916 ~~required by s. 627.736~~, intentionally submitting a claim,
917 statement, or bill for payment of services that were not
918 rendered.

919 Section 33. Paragraph (b) of subsection (1) and subsection
920 (8) of section 624.155, Florida Statutes, are amended to read:

921 624.155 Civil remedy.—

922 (1) Any person may bring a civil action against an insurer
923 when such person is damaged:

924 (b) By the commission of any of the following acts by the
925 insurer:

926 1. Except for a civil action for bad faith failure to
927 settle a third-party claim subject to s. 624.156, not attempting
928 in good faith to settle claims when, under all the
929 circumstances, it could and should have done so, had it acted
930 fairly and honestly toward its insured and with due regard for
931 her or his interests;

932 2. Making claims payments to insureds or beneficiaries not
933 accompanied by a statement setting forth the coverage under
934 which payments are being made; ~~or~~

935 3. Except as to liability coverages, failing to promptly
936 settle claims, when the obligation to settle a claim has become
937 reasonably clear, under one portion of the insurance policy
938 coverage in order to influence settlements under other portions
939 of the insurance policy coverage; or



824756

940 4. When handling a first-party claim under a motor vehicle
941 insurance policy, not attempting in good faith to settle such
942 claim pursuant to subparagraph 1. when such failure is caused by
943 a failure to communicate to an insured:

944 a. The name, telephone number, e-mail address, and mailing
945 address of the person who is adjusting the claim;

946 b. Any issues that may impair the insured's coverage;

947 c. Information that might resolve the coverage issue in a
948 prompt manner;

949 d. Any basis for the insurer's rejection or nonacceptance
950 of any settlement demand or offer; or

951 e. Any needed extensions to respond to a time-limited
952 settlement offer.

953
954 Notwithstanding the provisions of the above to the contrary, a
955 person pursuing a remedy under this section need not prove that
956 such act was committed or performed with such frequency as to
957 indicate a general business practice.

958 (8) The civil remedy specified in this section does not
959 preempt any other remedy or cause of action provided for
960 pursuant to any other statute or pursuant to the common law of
961 this state. ~~A Any person is may obtain a judgment under either~~
962 ~~the common-law remedy of bad faith or this statutory remedy, but~~
963 ~~shall~~ not be entitled to a judgment under multiple bad faith
964 ~~both~~ remedies. This section shall not be construed to create a
965 common-law cause of action. The damages recoverable pursuant to
966 this section shall include those damages which are a reasonably
967 foreseeable result of a specified violation of this section by
968 the authorized insurer and may include an award or judgment in



824756

969 an amount that exceeds the policy limits.

970 Section 34. Section 624.156, Florida Statutes, is created
971 to read:

972 624.156 Actions against motor vehicle insurers for bad
973 faith failure to settle third-party claims.-

974 (1) SCOPE.-This section applies in all actions against any
975 insurer for bad faith failure to settle a third-party claim for
976 a loss arising out of the ownership, maintenance, or use of a
977 motor vehicle operated or principally garaged in this state at
978 the time of an incident or a loss, regardless of whether the
979 insurer is authorized to do business in this state or issued a
980 policy in this state. This section governs in any conflict with
981 common law or any other statute.

982 (2) DUTY OF GOOD FAITH.-In handling claims, an insurer has
983 a duty to its insured to handle claims in good faith by
984 complying with the best practices standards of subsection (4).
985 An insurer's negligence does not constitute bad faith. However,
986 negligence is relevant to whether an insurer acted in bad faith.

987 (3) BAD FAITH FAILURE TO SETTLE.-"Bad faith failure to
988 settle" means an insurer's failure to meet its duty of good
989 faith, as described in subsection (2), which is a proximate
990 cause of the insurer not settling a third-party claim when,
991 under all the circumstances, the insurer could and should have
992 done so, had it acted fairly and honestly toward its insured and
993 with due regard for the insured's interests.

994 (4) BEST PRACTICES STANDARDS.-An insurer must meet the best
995 practices standards of this subsection. The insurer's duty
996 begins upon receiving actual notice of an incident or a loss
997 that could give rise to a covered liability claim and continues



824756

998 until the claim is resolved. Notice may be communicated to the
999 insurer or an agent of the insurer by any means. However, if
1000 actual notice is communicated by means other than through any
1001 manner permitted by the policy or other documents provided to
1002 the insured by the insurer, through the insurer's website, or
1003 through the e-mail address designated by the insurer under s.
1004 624.422, the notice will not be effective under this subsection
1005 if that variation causes actual prejudice to the insurer's
1006 ability to settle the claim. The burden is on the party bringing
1007 the bad faith claim to prove that the insurer had actual notice
1008 of the incident or loss giving rise to the claim that resulted
1009 in an excess judgment and when such notice was received. After
1010 receipt of actual notice an insurer:

1011 (a) Must assign a duly licensed and appointed insurance
1012 adjuster to investigate the extent of the insured's probable
1013 exposure and diligently attempt to resolve any questions
1014 concerning the existence or extent of the insured's coverage.

1015 (b) Based on available information, must ethically evaluate
1016 every claim fairly, honestly, and with due regard for the
1017 interests of the insured; consider the extent of the claimant's
1018 recoverable damages; and consider the information in a
1019 reasonable and prudent manner.

1020 (c) Must request from the insured or claimant additional
1021 relevant information the insurer reasonably deems necessary to
1022 evaluate whether to settle a claim.

1023 (d) Must conduct all verbal and written communications with
1024 the insured with the utmost honesty and complete candor.

1025 (e) Must make reasonable efforts to explain to persons not
1026 represented by counsel matters requiring expertise beyond the



824756

1027 level normally expected of a layperson with no training in
1028 insurance or claims-handling issues.

1029 (f) Must retain all written communications and note and
1030 retain a summary of all verbal communications in a reasonable
1031 manner for a period of not less than 5 years after the later of:

1032 1. The entry of a judgment against the insured in excess of
1033 policy limits becomes final; or

1034 2. The conclusion of the extracontractual claim, if any,
1035 including any related appeals.

1036 (g) Must provide the insured, upon request, with all
1037 nonprivileged communications related to the insurer's handling
1038 of the claim which are not privileged as to the insured.

1039 (h) Must provide, at the insurer's expense, reasonable
1040 accommodations necessary to communicate effectively with an
1041 insured covered under the Americans with Disabilities Act.

1042 (i) In handling third-party claims, must communicate to an
1043 insured all of the following:

1044 1. The identity of any other person or entity the insurer
1045 has reason to believe may be liable.

1046 2. The insurer's evaluation of the claim.

1047 3. The likelihood and possible extent of an excess
1048 judgment.

1049 4. Steps the insured can take to avoid exposure to an
1050 excess judgment, including the right to secure personal counsel
1051 at the insured's expense.

1052 5. The insured's duty to cooperate with the insurer,
1053 including any specific requests required because of a settlement
1054 opportunity or by the insurer for the insured's cooperation
1055 under subsection (5), the purpose of the required cooperation,



824756

1056 and the consequences of refusing to cooperate.

1057 6. Any settlement demands or offers.

1058 (j) If, after the expiration of the safe harbor periods in
1059 subsection (8), the facts available to the insurer indicate that
1060 the insured's liability is likely to exceed the policy limits,
1061 must initiate settlement negotiations by tendering its policy
1062 limits to the claimant in exchange for a general release of the
1063 insured.

1064 (k)1. Must give fair consideration to a settlement offer
1065 that is not unreasonable under the facts available to the
1066 insurer and settle, if possible, when a reasonably prudent
1067 person, faced with the prospect of paying the total probable
1068 exposure of the insured, would do so. The insurer shall provide
1069 reasonable assistance to the insured to comply with the
1070 insured's obligations to cooperate and shall act reasonably to
1071 attempt to satisfy any conditions of a claimant's settlement
1072 offer. If it is not possible to settle a liability claim within
1073 the available policy limits, the insurer shall act reasonably to
1074 attempt to minimize the excess exposure to the insured.

1075 2. When multiple claims arise out of a single occurrence,
1076 the combined value of all claims exceeds the total of all
1077 applicable policy limits, and the claimants are unwilling to
1078 globally settle within the policy limits, must attempt to
1079 minimize the magnitude of possible excess judgments against the
1080 insured. Thereafter, the insurer is entitled to great discretion
1081 to decide how much to offer each respective claimant in its
1082 attempt to protect the insured. The insurer may, in its effort
1083 to minimize the excess liability of the insured, use its
1084 discretion to offer the full available policy limits to one or



824756

1085 more claimants to the exclusion of other claimants and may leave
1086 the insured exposed to some liability after all the policy
1087 limits are paid. An insurer does not act in bad faith simply
1088 because it is unable to settle all claims in a multiple claimant
1089 case. It is a defense to a bad faith action if the insurer
1090 establishes that it used its discretion for the benefit of its
1091 insureds and complied with the other best practices standards of
1092 this subsection.

1093 (l) When a loss creates the potential for a third-party
1094 claim against more than one insured, must attempt to settle the
1095 claim on behalf of all insureds against whom a claim may be
1096 presented. If it is not possible to settle on behalf of all
1097 insureds, the insurer may, in consultation with the insureds,
1098 enter into reasonable settlements of claims against certain
1099 insureds to the exclusion of other insureds.

1100 (m) Must respond to any request for insurance information
1101 in compliance with s. 627.4137 or s. 626.9372, as applicable.

1102 (n) Where it appears the insured's probable exposure is
1103 greater than policy limits, must take reasonable measures to
1104 preserve evidence, for a reasonable period of time, which is
1105 needed for the defense of the liability claim.

1106 (o) Must comply with s. 627.426, if applicable.

1107 (p) May not commit or perform with such frequency as to
1108 indicate a general business practice, any of the following:

1109 1. Failing to adopt and implement standards for the proper
1110 investigation of claims.

1111 2. Misrepresenting pertinent facts or insurance policy
1112 provisions relating to coverages at issue.

1113 3. Failing to acknowledge and act promptly upon



824756

1114 communications with respect to claims.
1115 4. Denying claims without conducting reasonable
1116 investigations based upon available information.
1117 (5) INSURED'S DUTY TO COOPERATE.-
1118 (a) Insureds have a duty to cooperate with their insurer in
1119 the defense of the claim and in making settlements. Accordingly,
1120 the insured must take any reasonable action requested by the
1121 injured claimant or provided in the policy which is necessary to
1122 assist the insurer in settling a covered claim, including:
1123 1. Executing affidavits regarding the facts within the
1124 insured's knowledge regarding the covered loss; and
1125 2. Providing documents, including those requested pursuant
1126 to paragraph (b).
1127 (b) When it is reasonably necessary to settle a covered
1128 claim valued in excess of all applicable policy limits, upon the
1129 request of the injured claimant, an insured must disclose on a
1130 form adopted by the department or provided by the claimant a
1131 summary of the following:
1132 1. The insured's assets at the time of the loss, including:
1133 a. Cash, stocks, bonds, and nonretirement-based mutual
1134 funds;
1135 b. Nonhomestead real property;
1136 c. All registered vehicles;
1137 d. All bank accounts;
1138 e. An estimated net accounting of all other assets; and
1139 f. Any additional information included by the department.
1140 2. The insured's liabilities, including:
1141 a. Mortgage debt;
1142 b. Credit card debt;



824756

1143 c. Child support and alimony payments;
1144 d. Other liabilities; and
1145 e. Any additional information included by the department.
1146 3. For a corporate entity, information on its balance
1147 sheet, including the corporate entity's:
1148 a. Cash, property, equipment, and inventory;
1149 b. Liabilities, including obligations, rent, money owed to
1150 vendors, payroll, and taxes;
1151 c. Other information relevant to understanding the entity's
1152 capital and net worth; and
1153 d. Any additional information included by the department.
1154 4. A list of all insurance policies that may provide
1155 coverage for the claim, stating the name of the insurer and
1156 policy number of each policy.
1157 5. For natural persons, a statement of whether the insured
1158 was acting in the course and scope of employment at the time of
1159 the incident or loss giving rise to the claim and, if so,
1160 providing the name and contact information for the insured's
1161 employer.
1162 (c) No later than 14 days following actual notice of an
1163 incident or a loss that could give rise to a covered liability
1164 claim, the insurer must notify the insured of the insured's
1165 duties under this subsection. The burden is on the insurer to
1166 prove it provided notice to the insured of the insured's duty to
1167 cooperate; otherwise, a presumption arises that the insured met
1168 its duty to cooperate under this subsection.
1169 (d) An insurer may terminate the defense as to any insured
1170 who unreasonably fails to meet its duties under this subsection
1171 when:



824756

1172 1. The insurer exercised diligence and met its duties under
1173 subparagraph (4)(i)5.;

1174 2. The insurer provided reasonable assistance to the
1175 insured to comply with the obligations of this subsection;

1176 3. The insurer gave the insured written notice of any
1177 failure to cooperate and a reasonable opportunity for the
1178 insured to cure the lack of cooperation, consistent with any
1179 deadlines imposed by settlement negotiations;

1180 4. The insured's failure to cooperate causes the insurer to
1181 be unable to settle the claim; and

1182 5. The insurer unconditionally tenders its available
1183 coverage policy limits directly to the claimant or the
1184 claimant's attorney.

1185 (e) When an insured's defense is terminated in compliance
1186 with this subsection, the insurer is not liable for any damages
1187 caused by a failure to settle or defend the liability claim
1188 against that insured.

1189 (6) CLAIMANT COMMUNICATIONS.—The trier of fact may not
1190 attribute the insurer's failure to settle a covered third-party
1191 claim to a claimant's lack of communication with the insurer
1192 when the claimant truthfully complies with all applicable
1193 standards of this subsection by:

1194 (a) Contemporaneously with or before making a claim with
1195 the insurer, communicating in writing to the insurer:

1196 1. The date and location of loss;

1197 2. The name, address, and date of birth of the claimant;

1198 and

1199 3. A physical address, an e-mail address, and a facsimile
1200 number for further communications, including, but not limited



824756

1201 to, responses to any settlement demand.

1202 (b) Presenting the following in writing:

1203 1. The legal and factual basis of the claim; and

1204 2. A reasonably detailed description of the claimant's:

1205 a. Known injuries caused or aggravated by the incident or

1206 loss on which the claim is based;

1207 b. Medical treatment causally related to the incident or

1208 loss on which the claim is based;

1209 c. Relevant pre-accident medical conditions, if known; and

1210 d. Type and amount of known damages incurred and, if any,

1211 the damages the claimant reasonably anticipates incurring in the

1212 future.

1213 (c) Providing any settlement demand in writing and stating

1214 within such demand:

1215 1. The name of each insured to whom the demand for

1216 settlement is directed;

1217 2. The amount of the demand for settlement; and

1218 3. Any conditions the claimant is placing on acceptance of

1219 the demand for settlement.

1220

1221 This subsection does not reduce an insurer's duty of good faith,

1222 which is owed solely to its insured. The claimant owes no duty

1223 to the insured or the insurer, and the duties of the claimant's

1224 attorney are owed solely to their client. The claimant and the

1225 claimant's attorneys do not have a duty to comply with this

1226 subsection.

1227 (7) CONDITIONS PRECEDENT.—It is a condition precedent to

1228 filing an action against an insurer for bad faith failure to

1229 settle a third-party claim that:



824756

1230 (a) A third-party claimant obtained a final judgment in
1231 excess of the policy limits against the insured or the insured's
1232 estate, bankruptcy trustee, or successor in interest, unless the
1233 insurer expressly waived the requirement of a final excess
1234 judgment or wrongfully breached its duty to defend the insured;
1235 and

1236 (b) The insurer or an agent of the insurer received actual
1237 notice effective under subsection (4).

1238 (8) SAFE HARBORS.—

1239 (a) After an insurer receives actual notice of an incident
1240 or a loss that could give rise to a covered liability claim, the
1241 insurer is entitled to a reasonable opportunity to investigate
1242 and evaluate the claim. The amount of time required for the
1243 insurer's investigation and evaluation will vary depending on
1244 the circumstances of the claim. The safe harbors provided in
1245 this subsection are available to an insurer that complies with
1246 the best practices standards of subsection (4).

1247 (b) When one claim arises out of a single occurrence, and
1248 an insurer initiates settlement negotiations by tendering the
1249 applicable policy limits in exchange for a general release of
1250 the insured within 45 days after receiving actual notice of the
1251 loss, the failure to tender the policy limits sooner does not
1252 constitute bad faith.

1253 (c) When multiple claims arise out of a single occurrence,
1254 the combined value of all claims exceeds the total of all
1255 applicable policy limits, and an insurer initiates settlement
1256 negotiations by globally tendering the applicable policy limits
1257 in exchange for a general release of the insured within 45 days
1258 after receiving actual notice of the loss, the failure to tender



824756

1259 policy limits sooner does not constitute bad faith.

1260 (d) An insurer is not under any circumstances liable for
1261 the failure to accept a settlement offer within 45 days after
1262 receiving actual notice of the loss if:

1263 1. The settlement offer provides the insurer fewer than 15
1264 days for acceptance; or

1265 2. The settlement offer provides the insurer fewer than 30
1266 days for acceptance where the offer contains conditions for
1267 acceptance other than the insurer's disclosure of its policy
1268 limits.

1269 (e) This subsection does not require that an insurer
1270 automatically tender policy limits within 45 days in every case.

1271 (9) BURDEN OF PROOF.—In any action for bad faith failure to
1272 settle as defined in subsection (3):

1273 (a) The party bringing the bad faith claim must prove every
1274 element of the claim by the greater weight of the evidence,
1275 taking into account the totality of the circumstances.

1276 (b) An insurer that relies upon paragraph (5) (d) as a
1277 defense to a claim for bad faith failure to settle must prove
1278 the elements of that paragraph by the greater weight of the
1279 evidence.

1280 (c) An insurer that relies upon a safe harbor provision of
1281 subsection (8) must prove the elements of the safe harbor by the
1282 greater weight of the evidence.

1283 (10) DAMAGES.—If the trier of fact finds that a claimant
1284 has met its burden of proof, the insurer is liable for the
1285 amount of any excess judgment, together with court costs and, if
1286 the claimant is the insured or an assignee of the insured, the
1287 reasonable attorney fees incurred by the claimant. Punitive



824756

1288 damages may not be awarded.

1289 (11) ENFORCEMENT.—If a judgment creditor obtains a judgment
1290 that exceeds the insured's limits of liability, the judgment
1291 creditor must be subrogated to the rights of the insured against
1292 the insurer for bad faith under this section.

1293 (12) LIMITATION ON MULTIPLE REMEDIES.—A person is not
1294 entitled to a judgment under multiple bad faith remedies.

1295 Section 35. Paragraphs (i) and (o) of subsection (1) of
1296 section 626.9541, Florida Statutes, are amended to read:

1297 626.9541 Unfair methods of competition and unfair or
1298 deceptive acts or practices defined.—

1299 (1) UNFAIR METHODS OF COMPETITION AND UNFAIR OR DECEPTIVE
1300 ACTS.—The following are defined as unfair methods of competition
1301 and unfair or deceptive acts or practices:

1302 (i) *Unfair claim settlement practices.*—

1303 1. Attempting to settle claims on the basis of an
1304 application, when serving as a binder or intended to become a
1305 part of the policy, or any other material document which was
1306 altered without notice to, or knowledge or consent of, the
1307 insured;

1308 2. Making a material misrepresentation ~~made~~ to an insured
1309 or any other person having an interest in the proceeds payable
1310 under such contract or policy, for the purpose and with the
1311 intent of effecting settlement of such claims, loss, or damage
1312 under such contract or policy on less favorable terms than those
1313 provided in, and contemplated by, such contract or policy; ~~or~~

1314 3. Committing or performing with such frequency as to
1315 indicate a general business practice any of the following:

1316 a. Failing to adopt and implement standards for the proper



824756

1317 investigation of claims;

1318 b. Misrepresenting pertinent facts or insurance policy
1319 provisions relating to coverages at issue;

1320 c. Failing to acknowledge and act promptly upon
1321 communications with respect to claims;

1322 d. Denying claims without conducting reasonable
1323 investigations based upon available information;

1324 e. Failing to affirm or deny full or partial coverage of
1325 claims, and, as to partial coverage, the dollar amount or extent
1326 of coverage, or failing to provide a written statement that the
1327 claim is being investigated, upon the written request of the
1328 insured within 30 days after proof-of-loss statements have been
1329 completed;

1330 f. Failing to promptly provide a reasonable explanation in
1331 writing to the insured of the basis in the insurance policy, in
1332 relation to the facts or applicable law, for denial of a claim
1333 or for the offer of a compromise settlement;

1334 g. Failing to promptly notify the insured of any additional
1335 information necessary for the processing of a claim; or

1336 h. Failing to clearly explain the nature of the requested
1337 information and the reasons why such information is necessary.

1338 ~~i. Failing to pay personal injury protection insurance~~
1339 ~~claims within the time periods required by s. 627.736(4)(b). The~~
1340 ~~office may order the insurer to pay restitution to a~~
1341 ~~policyholder, medical provider, or other claimant, including~~
1342 ~~interest at a rate consistent with the amount set forth in s.~~
1343 ~~55.03(1), for the time period within which an insurer fails to~~
1344 ~~pay claims as required by law. Restitution is in addition to any~~
1345 ~~other penalties allowed by law, including, but not limited to,~~



824756

1346 ~~the suspension of the insurer's certificate of authority.~~

1347 4. Failing to pay undisputed amounts of partial or full
1348 benefits owed under first-party property insurance policies
1349 within 90 days after an insurer receives notice of a residential
1350 property insurance claim, determines the amounts of partial or
1351 full benefits, and agrees to coverage, unless payment of the
1352 undisputed benefits is prevented by an act of God, prevented by
1353 the impossibility of performance, or due to actions by the
1354 insured or claimant that constitute fraud, lack of cooperation,
1355 or intentional misrepresentation regarding the claim for which
1356 benefits are owed.

1357 (o) *Illegal dealings in premiums; excess or reduced charges*
1358 *for insurance.*—

1359 1. Knowingly collecting any sum as a premium or charge for
1360 insurance, which is not then provided, or is not in due course
1361 to be provided, subject to acceptance of the risk by the
1362 insurer, by an insurance policy issued by an insurer as
1363 permitted by this code.

1364 2. Knowingly collecting as a premium or charge for
1365 insurance any sum in excess of or less than the premium or
1366 charge applicable to such insurance, in accordance with the
1367 applicable classifications and rates as filed with and approved
1368 by the office, and as specified in the policy; or, in cases when
1369 classifications, premiums, or rates are not required by this
1370 code to be so filed and approved, premiums and charges collected
1371 from a Florida resident in excess of or less than those
1372 specified in the policy and as fixed by the insurer.

1373 Notwithstanding any other provision of law, this provision shall
1374 not be deemed to prohibit the charging and collection, by



824756

1375 surplus lines agents licensed under part VIII of this chapter,
1376 of the amount of applicable state and federal taxes, or fees as
1377 authorized by s. 626.916(4), in addition to the premium required
1378 by the insurer or the charging and collection, by licensed
1379 agents, of the exact amount of any discount or other such fee
1380 charged by a credit card facility in connection with the use of
1381 a credit card, as authorized by subparagraph (q)3., in addition
1382 to the premium required by the insurer. This subparagraph shall
1383 not be construed to prohibit collection of a premium for a
1384 universal life or a variable or indeterminate value insurance
1385 policy made in accordance with the terms of the contract.

1386 3.a. Imposing or requesting an additional premium for
1387 bodily injury liability coverage, property damage liability
1388 coverage a policy of motor vehicle liability, personal injury
1389 protection, medical payments coverage payment, or collision
1390 coverage in a motor vehicle liability insurance policy insurance
1391 or any combination thereof or refusing to renew the policy
1392 solely because the insured was involved in a motor vehicle
1393 accident unless the insurer's file contains information from
1394 which the insurer in good faith determines that the insured was
1395 substantially at fault in the accident.

1396 b. An insurer which imposes and collects such a surcharge
1397 or which refuses to renew such policy shall, in conjunction with
1398 the notice of premium due or notice of nonrenewal, notify the
1399 named insured that he or she is entitled to reimbursement of
1400 such amount or renewal of the policy under the conditions listed
1401 below and will subsequently reimburse him or her or renew the
1402 policy, if the named insured demonstrates that the operator
1403 involved in the accident was:



824756

1404 (I) Lawfully parked;

1405 (II) Reimbursed by, or on behalf of, a person responsible
1406 for the accident or has a judgment against such person;

1407 (III) Struck in the rear by another vehicle headed in the
1408 same direction and was not convicted of a moving traffic
1409 violation in connection with the accident;

1410 (IV) Hit by a "hit-and-run" driver, if the accident was
1411 reported to the proper authorities within 24 hours after
1412 discovering the accident;

1413 (V) Not convicted of a moving traffic violation in
1414 connection with the accident, but the operator of the other
1415 automobile involved in such accident was convicted of a moving
1416 traffic violation;

1417 (VI) Finally adjudicated not to be liable by a court of
1418 competent jurisdiction;

1419 (VII) In receipt of a traffic citation which was dismissed
1420 or nolle prossed; or

1421 (VIII) Not at fault as evidenced by a written statement
1422 from the insured establishing facts demonstrating lack of fault
1423 which are not rebutted by information in the insurer's file from
1424 which the insurer in good faith determines that the insured was
1425 substantially at fault.

1426 c. In addition to the other provisions of this
1427 subparagraph, an insurer may not fail to renew a policy if the
1428 insured has had only one accident in which he or she was at
1429 fault within the current 3-year period. However, an insurer may
1430 nonrenew a policy for reasons other than accidents in accordance
1431 with s. 627.728. This subparagraph does not prohibit nonrenewal
1432 of a policy under which the insured has had three or more



824756

1433 accidents, regardless of fault, during the most recent 3-year
1434 period.

1435 4. Imposing or requesting an additional premium for, or
1436 refusing to renew, a policy for motor vehicle insurance solely
1437 because the insured committed a noncriminal traffic infraction
1438 as described in s. 318.14 unless the infraction is:

1439 a. A second infraction committed within an 18-month period,
1440 or a third or subsequent infraction committed within a 36-month
1441 period.

1442 b. A violation of s. 316.183, when such violation is a
1443 result of exceeding the lawful speed limit by more than 15 miles
1444 per hour.

1445 5. Upon the request of the insured, the insurer and
1446 licensed agent shall supply to the insured the complete proof of
1447 fault or other criteria which justifies the additional charge or
1448 cancellation.

1449 6. No insurer shall impose or request an additional premium
1450 for motor vehicle insurance, cancel or refuse to issue a policy,
1451 or refuse to renew a policy because the insured or the applicant
1452 is a handicapped or physically disabled person, so long as such
1453 handicap or physical disability does not substantially impair
1454 such person's mechanically assisted driving ability.

1455 7. No insurer may cancel or otherwise terminate any
1456 insurance contract or coverage, or require execution of a
1457 consent to rate endorsement, during the stated policy term for
1458 the purpose of offering to issue, or issuing, a similar or
1459 identical contract or coverage to the same insured with the same
1460 exposure at a higher premium rate or continuing an existing
1461 contract or coverage with the same exposure at an increased



824756

1462 premium.

1463 8. No insurer may issue a nonrenewal notice on any
1464 insurance contract or coverage, or require execution of a
1465 consent to rate endorsement, for the purpose of offering to
1466 issue, or issuing, a similar or identical contract or coverage
1467 to the same insured at a higher premium rate or continuing an
1468 existing contract or coverage at an increased premium without
1469 meeting any applicable notice requirements.

1470 9. No insurer shall, with respect to premiums charged for
1471 motor vehicle insurance, unfairly discriminate solely on the
1472 basis of age, sex, marital status, or scholastic achievement.

1473 10. Imposing or requesting an additional premium for motor
1474 vehicle comprehensive or uninsured motorist coverage solely
1475 because the insured was involved in a motor vehicle accident or
1476 was convicted of a moving traffic violation.

1477 11. No insurer shall cancel or issue a nonrenewal notice on
1478 any insurance policy or contract without complying with any
1479 applicable cancellation or nonrenewal provision required under
1480 the Florida Insurance Code.

1481 12. No insurer shall impose or request an additional
1482 premium, cancel a policy, or issue a nonrenewal notice on any
1483 insurance policy or contract because of any traffic infraction
1484 when adjudication has been withheld and no points have been
1485 assessed pursuant to s. 318.14(9) and (10). However, this
1486 subparagraph does not apply to traffic infractions involving
1487 accidents in which the insurer has incurred a loss due to the
1488 fault of the insured.

1489 Section 36. Paragraph (a) of subsection (1) of section
1490 626.989, Florida Statutes, is amended to read:



824756

1491 626.989 Investigation by department or Division of
1492 Investigative and Forensic Services; compliance; immunity;
1493 confidential information; reports to division; division
1494 investigator's power of arrest.—

1495 (1) For the purposes of this section:

1496 (a) A person commits a "fraudulent insurance act" if the
1497 person:

1498 1. Knowingly and with intent to defraud presents, causes to
1499 be presented, or prepares with knowledge or belief that it will
1500 be presented, to or by an insurer, self-insurer, self-insurance
1501 fund, servicing corporation, purported insurer, broker, or any
1502 agent thereof, any written statement as part of, or in support
1503 of, an application for the issuance of, or the rating of, any
1504 insurance policy, or a claim for payment or other benefit
1505 pursuant to any insurance policy, which the person knows to
1506 contain materially false information concerning any fact
1507 material thereto or if the person conceals, for the purpose of
1508 misleading another, information concerning any fact material
1509 thereto.

1510 2. Knowingly submits:

1511 a. A false, misleading, or fraudulent application or other
1512 document when applying for licensure as a health care clinic,
1513 seeking an exemption from licensure as a health care clinic, or
1514 demonstrating compliance with part X of chapter 400 with an
1515 intent to use the license, exemption from licensure, or
1516 demonstration of compliance to provide services or seek
1517 reimbursement under a motor vehicle liability insurance policy's
1518 medical payments coverage ~~the Florida Motor Vehicle No-Fault~~
1519 ~~Law.~~



824756

1520 b. A claim for payment or other benefit under medical
1521 payments coverage, ~~pursuant to a personal injury protection~~
1522 ~~insurance policy under the Florida Motor Vehicle No-Fault Law~~ if
1523 the person knows that the payee knowingly submitted a false,
1524 misleading, or fraudulent application or other document when
1525 applying for licensure as a health care clinic, seeking an
1526 exemption from licensure as a health care clinic, or
1527 demonstrating compliance with part X of chapter 400.

1528 Section 37. Subsection (1) of section 627.06501, Florida
1529 Statutes, is amended to read:

1530 627.06501 Insurance discounts for certain persons
1531 completing driver improvement course.—

1532 (1) Any rate, rating schedule, or rating manual for the
1533 liability, medical payments ~~personal injury protection~~, and
1534 collision coverages of a motor vehicle insurance policy filed
1535 with the office may provide for an appropriate reduction in
1536 premium charges as to such coverages if ~~when~~ the principal
1537 operator on the covered vehicle has successfully completed a
1538 driver improvement course approved and certified by the
1539 Department of Highway Safety and Motor Vehicles which is
1540 effective in reducing crash or violation rates, or both, as
1541 determined pursuant to s. 318.1451(5). Any discount, not to
1542 exceed 10 percent, used by an insurer is presumed to be
1543 appropriate unless credible data demonstrates otherwise.

1544 Section 38. Subsection (15) is added to section 627.0651,
1545 Florida Statutes, to read:

1546 627.0651 Making and use of rates for motor vehicle
1547 insurance.—

1548 (15) Rate filings for motor vehicle liability policies that



824756

1549 implement the financial responsibility requirements of s.
1550 324.022 in effect January 1, 2022, except for commercial motor
1551 vehicle insurance policies exempt under paragraph (14) (a), must
1552 reflect such financial responsibility requirements and may be
1553 approved only through the file and use process under paragraph
1554 (1) (a).

1555 Section 39. Subsection (1) of section 627.0652, Florida
1556 Statutes, is amended to read:

1557 627.0652 Insurance discounts for certain persons completing
1558 safety course.—

1559 (1) Any rates, rating schedules, or rating manuals for the
1560 liability, medical payments ~~personal injury protection~~, and
1561 collision coverages of a motor vehicle insurance policy filed
1562 with the office must ~~shall~~ provide for an appropriate reduction
1563 in premium charges as to such coverages if ~~when~~ the principal
1564 operator on the covered vehicle is an insured 55 years of age or
1565 older who has successfully completed a motor vehicle accident
1566 prevention course approved by the Department of Highway Safety
1567 and Motor Vehicles. Any discount used by an insurer is presumed
1568 to be appropriate unless credible data demonstrates otherwise.

1569 Section 40. Subsections (1), (3), and (6) of section
1570 627.0653, Florida Statutes, are amended to read:

1571 627.0653 Insurance discounts for specified motor vehicle
1572 equipment.—

1573 (1) Any rates, rating schedules, or rating manuals for the
1574 liability, medical payments ~~personal injury protection~~, and
1575 collision coverages of a motor vehicle insurance policy filed
1576 with the office must ~~shall~~ provide a premium discount if the
1577 insured vehicle is equipped with factory-installed, four-wheel



824756

1578 antilock brakes.

1579 (3) Any rates, rating schedules, or rating manuals for
1580 ~~personal injury protection coverage and~~ medical payments
1581 ~~coverage, if offered,~~ of a motor vehicle insurance policy filed
1582 with the office must ~~shall~~ provide a premium discount if the
1583 insured vehicle is equipped with one or more air bags that ~~which~~
1584 are factory installed.

1585 (6) The Office of Insurance Regulation may approve a
1586 premium discount to any rates, rating schedules, or rating
1587 manuals for the liability, medical payments ~~personal injury~~
1588 ~~protection,~~ and collision coverages of a motor vehicle insurance
1589 policy filed with the office if the insured vehicle is equipped
1590 with an automated driving system or electronic vehicle collision
1591 avoidance technology that is factory installed or a retrofitted
1592 system and that complies with National Highway Traffic Safety
1593 Administration standards.

1594 Section 41. Section 627.4132, Florida Statutes, is amended
1595 to read:

1596 627.4132 Stacking of coverages prohibited.—If an insured or
1597 named insured is protected by any type of motor vehicle
1598 insurance policy for bodily injury and property damage
1599 ~~liability, personal injury protection, or other coverage,~~ the
1600 policy must ~~shall~~ provide that the insured or named insured is
1601 protected only to the extent of the coverage she or he has on
1602 the vehicle involved in the accident. However, if none of the
1603 insured's or named insured's vehicles are ~~is~~ involved in the
1604 accident, coverage is available only to the extent of coverage
1605 on any one of the vehicles with applicable coverage. Coverage on
1606 any other vehicles may ~~shall~~ not be added to or stacked upon



824756

1607 that coverage. This section does not ~~apply~~:

1608 (1) Apply to uninsured motorist coverage that ~~which~~ is
1609 separately governed by s. 627.727.

1610 (2) ~~To~~ Reduce the coverage available by reason of insurance
1611 policies insuring different named insureds.

1612 Section 42. Subsection (1) of section 627.4137, Florida
1613 Statutes, is amended to read:

1614 627.4137 Disclosure of certain information required.—

1615 (1) Each insurer which does or may provide liability
1616 insurance coverage to pay all or a portion of any claim which
1617 might be made shall provide, within 30 days of the written
1618 request of the claimant or the claimant's attorney, a statement,
1619 under oath, of a corporate officer or the insurer's claims
1620 manager or superintendent setting forth the following
1621 information with regard to each known policy of insurance,
1622 including excess or umbrella insurance:

1623 (a) The name of the insurer.

1624 (b) The name of each insured.

1625 (c) The limits of the liability coverage.

1626 (d) A statement of any policy or coverage defense which
1627 such insurer reasonably believes is available to such insurer at
1628 the time of filing such statement.

1629 (e) A copy of the policy.

1630

1631 In addition, the insured, or her or his insurance agent, upon
1632 written request of the claimant or the claimant's attorney,
1633 shall disclose the name and coverage of each known insurer to
1634 the claimant and shall forward such request for information as
1635 required by this subsection to all affected insurers. The



824756

1636 insurer shall then supply the information required in this
1637 subsection to the claimant within 30 days of receipt of such
1638 request. If an insurer fails to timely comply with this section,
1639 the claimant may file an action in a court of competent
1640 jurisdiction to enforce this section. If the court determines
1641 that the insurer violated this section, the claimant is entitled
1642 to an award of reasonable attorney fees and costs to be paid by
1643 the insurer.

1644 Section 43. Section 627.7263, Florida Statutes, is amended
1645 to read:

1646 627.7263 Rental and leasing driver's insurance to be
1647 primary; exception.—

1648 (1) The valid and collectible liability insurance and
1649 medical payments coverage ~~or personal injury protection~~
1650 ~~insurance providing coverage~~ for the lessor of a motor vehicle
1651 for rent or lease is primary unless otherwise stated in at least
1652 10-point type on the face of the rental or lease agreement. Such
1653 insurance is primary for the limits of liability ~~and personal~~
1654 ~~injury protection~~ coverage as required by s. 324.021(7) and the
1655 medical payments coverage limit specified under s. 627.7265 ~~ss.~~
1656 ~~324.021(7) and 627.736.~~

1657 (2) If the lessee's coverage is to be primary, the rental
1658 or lease agreement must contain the following language, in at
1659 least 10-point type:

1660
1661 "The valid and collectible liability insurance and medical
1662 payments coverage ~~personal injury protection insurance~~ of an any
1663 authorized rental or leasing driver is primary for the limits of
1664 liability ~~and personal injury protection~~ coverage required under



824756

1665 section 324.021(7), Florida Statutes, and the medical payments
1666 coverage limit specified under section 627.7265 by ss.
1667 324.021(7) and 627.736, Florida Statutes."

1668 Section 44. Section 627.7265, Florida Statutes, is created
1669 to read:

1670 627.7265 Motor vehicle insurance; medical payments
1671 coverage.-

1672 (1) Medical payments coverage must protect the named
1673 insured, resident relatives, persons operating the insured motor
1674 vehicle, passengers in the insured motor vehicle, and persons
1675 who are struck by the insured motor vehicle and suffer bodily
1676 injury while not an occupant of a self-propelled motor vehicle
1677 at a limit of at least \$5,000 for medical expenses incurred due
1678 to bodily injury, sickness, or disease arising out of the
1679 ownership, maintenance, or use of a motor vehicle. The coverage
1680 must provide an additional death benefit of at least \$5,000.

1681 (a) Before issuing a motor vehicle liability insurance
1682 policy that is furnished as proof of financial responsibility
1683 under s. 324.031, the insurer must offer medical payments
1684 coverage at limits of \$5,000 and \$10,000. The insurer may also
1685 offer medical payments coverage at any limit greater than
1686 \$5,000.

1687 (b) The insurer must offer medical payments coverage with
1688 no deductible. The insurer may also offer medical payments
1689 coverage with a deductible not to exceed \$500.

1690 (c) Each motor vehicle liability insurance policy furnished
1691 as proof of financial responsibility under s. 324.031 is deemed
1692 to have:

1693 1. Medical payments coverage to a limit of \$10,000, unless



824756

1694 the insurer obtains a named insured's written refusal of medical
1695 payments coverage or written selection of medical payments
1696 coverage at a limit other than \$10,000. The rejection or
1697 selection of coverage at a limit other than \$10,000 must be made
1698 on a form approved by the office.

1699 2. No medical payments coverage deductible, unless the
1700 insurer obtains a named insured's written selection of a
1701 deductible up to \$500. The selection of a deductible must be
1702 made on a form approved by the office.

1703 (d)1. The forms referenced in subparagraphs (c)1. and 2.
1704 must fully advise the applicant of the nature of the coverage
1705 being rejected or the policy limit or deductible being selected.
1706 If the form is signed by a named insured, it is conclusively
1707 presumed that there was an informed, knowing rejection of the
1708 coverage or election of the policy limit or deductible.

1709 2. Unless a named insured requests in writing the coverage
1710 specified in this section, it need not be provided in or
1711 supplemental to any other policy that renews, insures, extends,
1712 changes, supersedes, or replaces an existing policy if a named
1713 insured has rejected the coverage specified in this section or
1714 has selected an alternative coverage limit or deductible. At
1715 least annually, the insurer shall provide to the named insured a
1716 notice of the availability of such coverage in a form approved
1717 by the office. The notice must be part of, and attached to, the
1718 notice of premium and must provide for a means to allow a named
1719 insured to request medical payments coverage at the limits and
1720 deductibles required to be offered under this section. The
1721 notice must be given in a manner approved by the office. Receipt
1722 of this notice does not constitute an affirmative waiver of the



824756

1723 insured's right to medical payments coverage if a named insured
1724 has not signed a selection or rejection form.

1725 (e) This section may not be construed to limit any other
1726 coverage made available by an insurer.

1727 (2) Upon receiving notice of an accident that is
1728 potentially covered by medical payments coverage benefits, the
1729 insurer must reserve \$5,000 of medical payments coverage
1730 benefits for payment to physicians licensed under chapter 458 or
1731 chapter 459 or dentists licensed under chapter 466 who provide
1732 emergency services and care, as defined in s. 395.002, or who
1733 provide hospital inpatient care. The amount required to be held
1734 in reserve may be used only to pay claims from such physicians
1735 or dentists until 30 days after the date the insurer receives
1736 notice of the accident. After the 30-day period, any amount of
1737 the reserve for which the insurer has not received notice of
1738 such claims may be used by the insurer to pay other claims. This
1739 subsection does not require an insurer to establish a claim
1740 reserve for insurance accounting purposes.

1741 (3) An insurer providing medical payments coverage benefits
1742 may not:

1743 (a) Seek a lien on any recovery in tort by judgment,
1744 settlement, or otherwise for medical payments coverage benefits,
1745 regardless of whether suit has been filed or settlement has been
1746 reached without suit; or

1747 (b) Bring a cause of action against a person to whom or for
1748 whom medical payments coverage benefits were paid, except when
1749 medical payments coverage benefits were paid by reason of fraud
1750 committed by that person.

1751 (4) An insurer providing medical payments coverage may



824756

1752 include provisions in its policy allowing for subrogation for
1753 medical payments coverage benefits paid if the expenses giving
1754 rise to the payments were caused by the wrongful act or omission
1755 of another who is not also an insured under the policy paying
1756 the medical payments coverage benefits. However, this
1757 subrogation right is inferior to the rights of the injured
1758 insured and is available only after all the insured's damages
1759 are recovered and the insured is made whole. An insured who
1760 obtains a recovery from a third party of the full amount of the
1761 damages sustained and delivers a release or satisfaction that
1762 impairs a medical payments insurer's subrogation right is liable
1763 to the insurer for repayment of medical payments coverage
1764 benefits less any expenses of acquiring the recovery, including
1765 a prorated share of attorney fees and costs, and shall hold that
1766 net recovery in trust to be delivered to the medical payments
1767 insurer. The insurer may not include any provision in its policy
1768 allowing for subrogation for any death benefit paid.

1769 Section 45. Subsections (1) and (7) of section 627.727,
1770 Florida Statutes, are amended to read:

1771 627.727 Motor vehicle insurance; uninsured and underinsured
1772 vehicle coverage; insolvent insurer protection.—

1773 (1) A ~~Ne~~ motor vehicle liability insurance policy that
1774 which provides bodily injury liability coverage may not shall be
1775 delivered or issued for delivery in this state with respect to
1776 any specifically insured or identified motor vehicle registered
1777 or principally garaged in this state, unless uninsured motor
1778 vehicle coverage is provided therein or supplemental thereto for
1779 the protection of persons insured thereunder who are legally
1780 entitled to recover damages from owners or operators of



824756

1781 uninsured motor vehicles because of bodily injury, sickness, or
1782 disease, including death, resulting therefrom. However, the
1783 coverage required under this section is not applicable if ~~when~~,
1784 or to the extent that, an insured named in the policy makes a
1785 written rejection of the coverage on behalf of all insureds
1786 under the policy. If ~~When~~ a motor vehicle is leased for ~~a period~~
1787 ~~of~~ 1 year or longer and the lessor of such vehicle, by the terms
1788 of the lease contract, provides liability coverage on the leased
1789 vehicle, the lessee of such vehicle has ~~shall have~~ the sole
1790 privilege to reject uninsured motorist coverage or to select
1791 lower limits than the bodily injury liability limits, regardless
1792 of whether the lessor is qualified as a self-insurer pursuant to
1793 s. 324.171. Unless an insured, or a lessee having the privilege
1794 of rejecting uninsured motorist coverage, requests such coverage
1795 or requests higher uninsured motorist limits in writing, the
1796 coverage or such higher uninsured motorist limits need not be
1797 provided in or supplemental to any other policy that ~~which~~
1798 renews, extends, changes, supersedes, or replaces an existing
1799 policy with the same bodily injury liability limits when an
1800 insured or lessee had rejected the coverage. When an insured or
1801 lessee has initially selected limits of uninsured motorist
1802 coverage lower than her or his bodily injury liability limits,
1803 higher limits of uninsured motorist coverage need not be
1804 provided in or supplemental to any other policy that ~~which~~
1805 renews, extends, changes, supersedes, or replaces an existing
1806 policy with the same bodily injury liability limits unless an
1807 insured requests higher uninsured motorist coverage in writing.
1808 The rejection or selection of lower limits must ~~shall~~ be made on
1809 a form approved by the office. The form must ~~shall~~ fully advise



824756

1810 the applicant of the nature of the coverage and must ~~shall~~ state
1811 that the coverage is equal to bodily injury liability limits
1812 unless lower limits are requested or the coverage is rejected.
1813 The heading of the form must ~~shall~~ be in 12-point bold type and
1814 must ~~shall~~ state: "You are electing not to purchase certain
1815 valuable coverage that ~~which~~ protects you and your family or you
1816 are purchasing uninsured motorist limits less than your bodily
1817 injury liability limits when you sign this form. Please read
1818 carefully." If this form is signed by a named insured, it will
1819 be conclusively presumed that there was an informed, knowing
1820 rejection of coverage or election of lower limits on behalf of
1821 all insureds. The insurer shall notify the named insured at
1822 least annually of her or his options as to the coverage required
1823 by this section. Such notice must ~~shall~~ be part of, and attached
1824 to, the notice of premium, must ~~shall~~ provide for a means to
1825 allow the insured to request such coverage, and must ~~shall~~ be
1826 given in a manner approved by the office. Receipt of this notice
1827 does not constitute an affirmative waiver of the insured's right
1828 to uninsured motorist coverage if ~~where~~ the insured has not
1829 signed a selection or rejection form. The coverage described
1830 under this section must ~~shall~~ be over and above, but may ~~shall~~
1831 not duplicate, the benefits available to an insured under any
1832 workers' compensation law, ~~personal injury protection benefits,~~
1833 disability benefits law, or similar law; under any automobile
1834 medical payments ~~expense~~ coverage; under any motor vehicle
1835 liability insurance coverage; or from the owner or operator of
1836 the uninsured motor vehicle or any other person or organization
1837 jointly or severally liable together with such owner or operator
1838 for the accident, ~~+~~ and such coverage must ~~shall~~ cover the



824756

1839 difference, if any, between the sum of such benefits and the
1840 damages sustained, up to the maximum amount of such coverage
1841 provided under this section. The amount of coverage available
1842 under this section may ~~shall~~ not be reduced by a setoff against
1843 any coverage, including liability insurance. Such coverage does
1844 ~~shall~~ not inure directly or indirectly to the benefit of any
1845 workers' compensation or disability benefits carrier or any
1846 person or organization qualifying as a self-insurer under any
1847 workers' compensation or disability benefits law or similar law.

1848 (7) The legal liability of an uninsured motorist coverage
1849 insurer includes ~~does not include~~ damages in tort for pain,
1850 suffering, disability or physical impairment, disfigurement,
1851 mental anguish, and inconvenience, and the loss of capacity for
1852 the enjoyment of life experienced in the past and to be
1853 experienced in the future unless the injury or disease is
1854 described in one or more of paragraphs (a) - (d) of s. 627.737(2).

1855 Section 46. Section 627.7275, Florida Statutes, is amended
1856 to read:

1857 627.7275 Motor vehicle liability.-

1858 (1) A motor vehicle insurance policy ~~providing personal~~
1859 ~~injury protection as set forth in s. 627.736~~ may not be
1860 delivered or issued for delivery in this state for a with
1861 ~~respect to any~~ specifically insured or identified motor vehicle
1862 registered or principally garaged in this state must provide
1863 bodily injury liability coverage and unless the policy also
1864 ~~provides coverage for~~ property damage liability coverage as
1865 required under ~~by~~ s. 324.022.

1866 (2) (a) Insurers writing motor vehicle insurance in this
1867 state shall make available, subject to the insurers' usual



824756

1868 underwriting restrictions:

1869 1. Coverage under policies as described in subsection (1)
1870 to an applicant for private passenger motor vehicle insurance
1871 coverage who is seeking the coverage in order to reinstate the
1872 applicant's driving privileges in this state if the driving
1873 privileges were revoked or suspended pursuant to s. 316.646 or
1874 s. 324.0221 due to the failure of the applicant to maintain
1875 required security.

1876 2. Coverage under policies as described in subsection (1),
1877 which includes bodily injury ~~also provides~~ liability coverage
1878 and property damage liability coverage, ~~for bodily injury,~~
1879 ~~death, and property damage arising out of the ownership,~~
1880 ~~maintenance, or use of the motor vehicle~~ in an amount not less
1881 than the minimum limits required under ~~described in~~ s.
1882 324.021(7) or s. 324.023 and which conforms to the requirements
1883 of s. 324.151, to an applicant for private passenger motor
1884 vehicle insurance coverage who is seeking the coverage in order
1885 to reinstate the applicant's driving privileges in this state
1886 after such privileges were revoked or suspended under s. 316.193
1887 or s. 322.26(2) for driving under the influence.

1888 (b) The policies described in paragraph (a) must ~~shall~~ be
1889 issued for at least 6 months and, as to the minimum coverages
1890 required under this section, may not be canceled by the insured
1891 for any reason or by the insurer after 60 days, during which
1892 period the insurer is completing the underwriting of the policy.
1893 After the insurer has completed underwriting the policy, the
1894 insurer shall notify the Department of Highway Safety and Motor
1895 Vehicles that the policy is in full force and effect and is not
1896 cancelable for the remainder of the policy period. A premium



824756

1897 ~~must shall~~ be collected and the coverage is in effect for the
1898 60-day period during which the insurer is completing the
1899 underwriting of the policy, whether or not the person's driver
1900 license, motor vehicle tag, and motor vehicle registration are
1901 in effect. Once the noncancelable provisions of the policy
1902 become effective, the bodily injury liability and property
1903 damage liability coverages ~~for bodily injury, property damage,~~
1904 ~~and personal injury protection~~ may not be reduced below the
1905 minimum limits required under s. 324.021 or s. 324.023 during
1906 the policy period.

1907 (c) This subsection controls to the extent of any conflict
1908 with any other section.

1909 (d) An insurer issuing a policy subject to this section may
1910 cancel the policy if, during the policy term, the named insured,
1911 or any other operator who resides in the same household or
1912 customarily operates an automobile insured under the policy, has
1913 his or her driver license suspended or revoked.

1914 (e) This subsection does not require an insurer to offer a
1915 policy of insurance to an applicant if such offer would be
1916 inconsistent with the insurer's underwriting guidelines and
1917 procedures.

1918 Section 47. Effective upon this act becoming a law, section
1919 627.7278, Florida Statutes, is created to read:

1920 627.7278 Applicability and construction; notice to
1921 policyholders.-

1922 (1) As used in this section, the term "minimum security
1923 requirements" means security that enables a person to respond in
1924 damages for liability on account of crashes arising out of the
1925 ownership, maintenance, or use of a motor vehicle, in the



824756

1926 amounts required by s. 324.022(1), as amended by this act.
1927 (2) Effective January 1, 2022:
1928 (a) Motor vehicle insurance policies issued or renewed on
1929 or after that date may not include personal injury protection.
1930 (b) All persons subject to s. 324.022, s. 324.032, s.
1931 627.7415, or s. 627.742 must maintain at least minimum security
1932 requirements.
1933 (c) Any new or renewal motor vehicle insurance policy
1934 delivered or issued for delivery in this state must provide
1935 coverage that complies with minimum security requirements.
1936 (d) An existing motor vehicle insurance policy issued
1937 before that date which provides personal injury protection and
1938 property damage liability coverage that meets the requirements
1939 of s. 324.022 on December 31, 2021, but which does not meet
1940 minimum security requirements on or after January 1, 2022, is
1941 deemed to meet minimum security requirements until such policy
1942 is renewed, nonrenewed, or canceled on or after January 1, 2022.
1943 Sections 627.730-627.7405, 400.9905, 400.991, 456.057, 456.072,
1944 627.7263, 627.727, 627.748, 626.9541(1)(i), and 817.234, Florida
1945 Statutes 2020, remain in full force and effect for motor vehicle
1946 accidents covered under a policy issued under the Florida Motor
1947 Vehicle No-Fault Law before January 1, 2022, until the policy is
1948 renewed, nonrenewed, or canceled on or after January 1, 2022.
1949 (3) Each insurer shall allow each insured who has a new or
1950 renewal policy providing personal injury protection which
1951 becomes effective before January 1, 2022, and whose policy does
1952 not meet minimum security requirements on or after January 1,
1953 2022, to change coverages so as to eliminate personal injury
1954 protection and obtain coverage providing minimum security



824756

1955 requirements, which shall be effective on or after January 1,
1956 2022. The insurer is not required to provide coverage complying
1957 with minimum security requirements in such policies if the
1958 insured does not pay the required premium, if any, by January 1,
1959 2022, or such later date as the insurer may allow. The insurer
1960 also shall offer each insured medical payments coverage pursuant
1961 to s. 627.7265. Any reduction in the premium must be refunded by
1962 the insurer. The insurer may not impose on the insured an
1963 additional fee or charge that applies solely to a change in
1964 coverage; however, the insurer may charge an additional required
1965 premium that is actuarially indicated.

1966 (4) By September 1, 2021, each motor vehicle insurer shall
1967 provide notice of this section to each motor vehicle
1968 policyholder who is subject to this section. The notice is
1969 subject to approval by the office and must clearly inform the
1970 policyholder that:

1971 (a) The Florida Motor Vehicle No-Fault Law is repealed
1972 effective January 1, 2022, and that on or after that date, the
1973 insured is no longer required to maintain personal injury
1974 protection insurance coverage, that personal injury protection
1975 coverage is no longer available for purchase in this state, and
1976 that all new or renewal policies issued on or after that date
1977 will not contain that coverage.

1978 (b) Effective January 1, 2022, a person subject to the
1979 financial responsibility requirements of s. 324.022 must
1980 maintain minimum security requirements that enable the person to
1981 respond to damages for liability on account of accidents arising
1982 out of the use of a motor vehicle in the following amounts:

1983 1. Twenty-five thousand dollars for bodily injury to, or



824756

1984 the death of, one person in any one crash and, subject to such
1985 limits for one person, in the amount of \$50,000 for bodily
1986 injury to, or the death of, two or more persons in any one
1987 crash; and

1988 2. Ten thousand dollars for damage to, or destruction of,
1989 the property of others in any one crash.

1990 (c) Bodily injury liability coverage protects the insured,
1991 up to the coverage limits, against loss if the insured is
1992 legally responsible for the death of or bodily injury to others
1993 in a motor vehicle accident.

1994 (d) Effective January 1, 2022, each policyholder of motor
1995 vehicle liability insurance purchased as proof of financial
1996 responsibility must be offered medical payments coverage
1997 benefits that comply with s. 627.7265. The insurer must offer
1998 medical payments coverage at limits of \$5,000 and \$10,000
1999 without a deductible. The insurer may also offer medical
2000 payments coverage at other limits greater than \$5,000 and may
2001 offer coverage with a deductible of up to \$500. Medical payments
2002 coverage pays covered medical expenses incurred due to bodily
2003 injury, sickness, or disease arising out of the ownership,
2004 maintenance, or use of the motor vehicle, up to the limits of
2005 such coverage, for injuries sustained in a motor vehicle crash
2006 by the named insured, resident relatives, any person operating
2007 the insured motor vehicle, passengers in the insured motor
2008 vehicle, and persons who are struck by the insured motor vehicle
2009 and suffer bodily injury while not an occupant of a self-
2010 propelled motor vehicle as provided in s. 627.7265. Medical
2011 payments coverage also provides a death benefit of at least
2012 \$5,000.



824756

2013 (e) The policyholder may obtain uninsured and underinsured
2014 motorist coverage that provides benefits, up to the limits of
2015 such coverage, to a policyholder or other insured entitled to
2016 recover damages for bodily injury, sickness, disease, or death
2017 resulting from a motor vehicle accident with an uninsured or
2018 underinsured owner or operator of a motor vehicle.

2019 (f) If the policyholder's new or renewal motor vehicle
2020 insurance policy is effective before January 1, 2022, and
2021 contains personal injury protection and property damage
2022 liability coverage as required by state law before January 1,
2023 2022, but does not meet minimum security requirements on or
2024 after January 1, 2022, the policy is deemed to meet minimum
2025 security requirements until it is renewed, nonrenewed, or
2026 canceled on or after January 1, 2022.

2027 (g) A policyholder whose new or renewal policy becomes
2028 effective before January 1, 2022, but does not meet minimum
2029 security requirements on or after January 1, 2022, may change
2030 coverages under the policy so as to eliminate personal injury
2031 protection and to obtain coverage providing minimum security
2032 requirements, including bodily injury liability coverage, which
2033 are effective on or after January 1, 2022.

2034 (h) If the policyholder has any questions, he or she should
2035 contact the person named at the telephone number provided in the
2036 notice.

2037 Section 48. Paragraph (a) of subsection (1) of section
2038 627.728, Florida Statutes, is amended to read:

2039 627.728 Cancellations; nonrenewals.—

2040 (1) As used in this section, the term:

2041 (a) "Policy" means the bodily injury and property damage



824756

2042 liability, ~~personal injury protection~~, medical payments,
2043 comprehensive, collision, and uninsured motorist coverage
2044 portions of a policy of motor vehicle insurance delivered or
2045 issued for delivery in this state:

2046 1. Insuring a natural person as named insured or one or
2047 more related individuals who are residents ~~resident~~ of the same
2048 household; and

2049 2. Insuring only a motor vehicle of the private passenger
2050 type or station wagon type which is not used as a public or
2051 livery conveyance for passengers or rented to others; or
2052 insuring any other four-wheel motor vehicle having a load
2053 capacity of 1,500 pounds or less which is not used in the
2054 occupation, profession, or business of the insured other than
2055 farming; other than any policy issued under an automobile
2056 insurance assigned risk plan or covering garage, automobile
2057 sales agency, repair shop, service station, or public parking
2058 place operation hazards.

2059
2060 The term "policy" does not include a binder as defined in s.
2061 627.420 unless the duration of the binder period exceeds 60
2062 days.

2063 Section 49. Subsection (1), paragraph (a) of subsection
2064 (5), and subsections (6) and (7) of section 627.7295, Florida
2065 Statutes, are amended to read:

2066 627.7295 Motor vehicle insurance contracts.—

2067 (1) As used in this section, the term:

2068 (a) "Policy" means a motor vehicle insurance policy that
2069 provides bodily injury liability ~~personal injury protection~~
2070 coverage and, ~~property damage liability coverage, or both.~~



824756

2071 (b) "Binder" means a binder that provides motor vehicle
2072 bodily injury liability coverage ~~personal injury protection~~ and
2073 property damage liability coverage.

2074 (5) (a) A licensed general lines agent may charge a per-
2075 policy fee of up to not to exceed \$10 to cover the
2076 administrative costs of the agent associated with selling the
2077 motor vehicle insurance policy if the policy covers only bodily
2078 injury liability coverage ~~personal injury protection coverage as~~
2079 ~~provided by s. 627.736~~ and property damage liability coverage as
2080 provided by s. 627.7275 and if no other insurance is sold or
2081 issued in conjunction with or collateral to the policy. The fee
2082 is not ~~considered~~ part of the premium.

2083 (6) If a motor vehicle owner's driver license, license
2084 plate, and registration have previously been suspended pursuant
2085 to s. 316.646 ~~or s. 627.733~~, an insurer may cancel a new policy
2086 only as provided in s. 627.7275.

2087 (7) A policy of private passenger motor vehicle insurance
2088 or a binder for such a policy may be initially issued in this
2089 state only if, before the effective date of such binder or
2090 policy, the insurer or agent has collected from the insured an
2091 amount equal to at least 1 month's premium. An insurer, agent,
2092 or premium finance company may not, directly or indirectly, take
2093 any action that results ~~resulting~~ in the insured paying ~~having~~
2094 ~~paid~~ from the insured's own funds an amount less than the 1
2095 month's premium required by this subsection. This subsection
2096 applies without regard to whether the premium is financed by a
2097 premium finance company or is paid pursuant to a periodic
2098 payment plan of an insurer or an insurance agent.

2099 (a) This subsection does not apply:



824756

2100 1. If an insured or member of the insured's family is
2101 renewing or replacing a policy or a binder for such policy
2102 written by the same insurer or a member of the same insurer
2103 group. ~~This subsection does not apply~~

2104 2. To an insurer that issues private passenger motor
2105 vehicle coverage primarily to active duty or former military
2106 personnel or their dependents. ~~This subsection does not apply~~

2107 3. If all policy payments are paid pursuant to a payroll
2108 deduction plan, an automatic electronic funds transfer payment
2109 plan from the policyholder, or a recurring credit card or debit
2110 card agreement with the insurer.

2111 (b) This subsection and subsection (4) do not apply if:

2112 1. All policy payments to an insurer are paid pursuant to
2113 an automatic electronic funds transfer payment plan from an
2114 agent, a managing general agent, or a premium finance company
2115 and if the policy includes, at a minimum, bodily injury
2116 liability coverage and ~~personal injury protection pursuant to~~
2117 ~~ss. 627.730-627.7405; motor vehicle property damage liability~~
2118 coverage pursuant to s. 627.7275; or and ~~bodily injury liability~~
2119 ~~in at least the amount of \$10,000 because of bodily injury to,~~
2120 ~~or death of, one person in any one accident and in the amount of~~
2121 ~~\$20,000 because of bodily injury to, or death of, two or more~~
2122 ~~persons in any one accident. This subsection and subsection (4)~~
2123 ~~do not apply if~~

2124 2. An insured has had a policy in effect for at least 6
2125 months, the insured's agent is terminated by the insurer that
2126 issued the policy, and the insured obtains coverage on the
2127 policy's renewal date with a new company through the terminated
2128 agent.



824756

2129 Section 50. Section 627.7415, Florida Statutes, is amended
2130 to read:

2131 627.7415 Commercial motor vehicles; additional liability
2132 insurance coverage.—Beginning January 1, 2022, commercial motor
2133 vehicles, as defined in s. 207.002 or s. 320.01, operated upon
2134 the roads and highways of this state must ~~shall~~ be insured with
2135 the following minimum levels of combined bodily liability
2136 insurance and property damage liability insurance in addition to
2137 any other insurance requirements:

2138 (1) Sixty ~~Fifty~~ thousand dollars per occurrence for a
2139 commercial motor vehicle with a gross vehicle weight of 26,000
2140 pounds or more, but less than 35,000 pounds.

2141 (2) One hundred twenty thousand dollars per occurrence for
2142 a commercial motor vehicle with a gross vehicle weight of 35,000
2143 pounds or more, but less than 44,000 pounds.

2144 (3) Three hundred thousand dollars per occurrence for a
2145 commercial motor vehicle with a gross vehicle weight of 44,000
2146 pounds or more.

2147 (4) All commercial motor vehicles subject to regulations of
2148 the United States Department of Transportation, 49 C.F.R. part
2149 387, subpart A, and as may be hereinafter amended, shall be
2150 insured in an amount equivalent to the minimum levels of
2151 financial responsibility as set forth in such regulations.

2152
2153 A violation of this section is a noncriminal traffic infraction,
2154 punishable as a nonmoving violation as provided in chapter 318.

2155 Section 51. Section 627.747, Florida Statutes, is created
2156 to read:

2157 627.747 Named driver exclusion.—



824756

2158 (1) A private passenger motor vehicle policy may exclude an
2159 identified individual from the following coverages while the
2160 identified individual is operating a motor vehicle, provided
2161 that the identified individual is specifically excluded by name
2162 on the declarations page or by endorsement and the policyholder
2163 consents in writing to the exclusion:

2164 (a) Property damage liability coverage.

2165 (b) Bodily injury liability coverage.

2166 (c) Uninsured motorist coverage for any damages sustained
2167 by the identified excluded individual, if the policyholder has
2168 purchased such coverage.

2169 (d) Medical payments coverage, if the policyholder has
2170 purchased such coverage.

2171 (e) Any coverage the policyholder is not required by law to
2172 purchase.

2173 (2) A private passenger motor vehicle policy may not
2174 exclude coverage when:

2175 (a) The identified excluded individual is injured while not
2176 operating a motor vehicle;

2177 (b) The exclusion is unfairly discriminatory under the
2178 Florida Insurance Code, as determined by the office; or

2179 (c) The exclusion is inconsistent with the underwriting
2180 rules filed by the insurer pursuant to s. 627.0651(13)(a).

2181 Section 52. Paragraphs (b), (c), and (g) of subsection (7),
2182 paragraphs (a) and (b) of subsection (8), and paragraph (b) of
2183 subsection (16) of section 627.748, Florida Statutes, are
2184 amended to read:

2185 627.748 Transportation network companies.—

2186 (7) TRANSPORTATION NETWORK COMPANY AND TNC DRIVER INSURANCE



824756

2187 REQUIREMENTS.—

2188 (b) The following automobile insurance requirements apply
2189 while a participating TNC driver is logged on to the digital
2190 network but is not engaged in a prearranged ride:

2191 1. Automobile insurance that provides:

2192 a. A primary automobile liability coverage of at least
2193 \$50,000 for death and bodily injury per person, \$100,000 for
2194 death and bodily injury per incident, and \$25,000 for property
2195 damage; and

2196 ~~b. Personal injury protection benefits that meet the~~
2197 ~~minimum coverage amounts required under ss. 627.730-627.7405;~~
2198 ~~and~~

2199 ~~e.~~ Uninsured and underinsured vehicle coverage as required
2200 by s. 627.727.

2201 2. The coverage requirements of this paragraph may be
2202 satisfied by any of the following:

2203 a. Automobile insurance maintained by the TNC driver or the
2204 TNC vehicle owner;

2205 b. Automobile insurance maintained by the TNC; or

2206 c. A combination of sub-subparagraphs a. and b.

2207 (c) The following automobile insurance requirements apply
2208 while a TNC driver is engaged in a prearranged ride:

2209 1. Automobile insurance that provides:

2210 a. A primary automobile liability coverage of at least \$1
2211 million for death, bodily injury, and property damage; and

2212 ~~b. Personal injury protection benefits that meet the~~
2213 ~~minimum coverage amounts required of a limousine under ss.~~
2214 ~~627.730-627.7405; and~~

2215 ~~e.~~ Uninsured and underinsured vehicle coverage as required



824756

2216 by s. 627.727.

2217 2. The coverage requirements of this paragraph may be
2218 satisfied by any of the following:

2219 a. Automobile insurance maintained by the TNC driver or the
2220 TNC vehicle owner;

2221 b. Automobile insurance maintained by the TNC; or

2222 c. A combination of sub-subparagraphs a. and b.

2223 (g) Insurance satisfying the requirements under this
2224 subsection is deemed to satisfy the financial responsibility
2225 requirement for a motor vehicle under chapter 324 ~~and the~~
2226 ~~security required under s. 627.733~~ for any period when the TNC
2227 driver is logged onto the digital network or engaged in a
2228 prearranged ride.

2229 (8) TRANSPORTATION NETWORK COMPANY AND INSURER; DISCLOSURE;
2230 EXCLUSIONS.—

2231 (a) Before a TNC driver is allowed to accept a request for
2232 a prearranged ride on the digital network, the TNC must disclose
2233 in writing to the TNC driver:

2234 1. The insurance coverage, including the types of coverage
2235 and the limits for each coverage, which the TNC provides while
2236 the TNC driver uses a TNC vehicle in connection with the TNC's
2237 digital network.

2238 2. That the TNC driver's own automobile insurance policy
2239 might not provide any coverage while the TNC driver is logged on
2240 to the digital network or is engaged in a prearranged ride,
2241 depending on the terms of the TNC driver's own automobile
2242 insurance policy.

2243 3. That the provision of rides for compensation which are
2244 not prearranged rides subjects the driver to the coverage



824756

2245 requirements imposed under s. 324.032(1) and (2) and that
2246 failure to meet such coverage requirements subjects the TNC
2247 driver to penalties provided in s. 324.221, up to and including
2248 a misdemeanor of the second degree.

2249 (b)1. An insurer that provides an automobile liability
2250 insurance policy under this part may exclude any and all
2251 coverage afforded under the policy issued to an owner or
2252 operator of a TNC vehicle while driving that vehicle for any
2253 loss or injury that occurs while a TNC driver is logged on to a
2254 digital network or while a TNC driver provides a prearranged
2255 ride. Exclusions imposed under this subsection are limited to
2256 coverage while a TNC driver is logged on to a digital network or
2257 while a TNC driver provides a prearranged ride. This right to
2258 exclude all coverage may apply to any coverage included in an
2259 automobile insurance policy, including, but not limited to:

2260 a. Liability coverage for bodily injury and property
2261 damage;

2262 b. Uninsured and underinsured motorist coverage;

2263 c. Medical payments coverage;

2264 d. Comprehensive physical damage coverage; and

2265 e. Collision physical damage coverage; ~~and~~

2266 ~~f. Personal injury protection.~~

2267 2. The exclusions described in subparagraph 1. apply
2268 notwithstanding any requirement under chapter 324. These
2269 exclusions do not affect or diminish coverage otherwise
2270 available for permissive drivers or resident relatives under the
2271 personal automobile insurance policy of the TNC driver or owner
2272 of the TNC vehicle who are not occupying the TNC vehicle at the
2273 time of loss. This section does not require that a personal



824756

2274 automobile insurance policy provide coverage while the TNC
2275 driver is logged on to a digital network, while the TNC driver
2276 is engaged in a prearranged ride, or while the TNC driver
2277 otherwise uses a vehicle to transport riders for compensation.

2278 3. This section must not be construed to require an insurer
2279 to use any particular policy language or reference to this
2280 section in order to exclude any and all coverage for any loss or
2281 injury that occurs while a TNC driver is logged on to a digital
2282 network or while a TNC driver provides a prearranged ride.

2283 4. This section does not preclude an insurer from providing
2284 primary or excess coverage for the TNC driver's vehicle by
2285 contract or endorsement.

2286 (16) LUXURY GROUND TRANSPORTATION NETWORK COMPANIES.—

2287 (b) An entity may elect, upon written notification to the
2288 department, to be regulated as a luxury ground TNC. A luxury
2289 ground TNC must:

2290 1. Comply with all of the requirements of this section
2291 applicable to a TNC, including subsection (17), which do not
2292 conflict with subparagraph 2. or which do not prohibit the
2293 company from connecting riders to drivers who operate for-hire
2294 vehicles as defined in s. 320.01(15), including limousines and
2295 luxury sedans and excluding taxicabs.

2296 2. Maintain insurance coverage as required by subsection
2297 (7). However, if a prospective luxury ground TNC satisfies
2298 minimum financial responsibility through compliance with s.
2299 324.032(3) ~~s. 324.032(2)~~ by using self-insurance when it gives
2300 the department written notification of its election to be
2301 regulated as a luxury ground TNC, the luxury ground TNC may use
2302 self-insurance to meet the insurance requirements of subsection



824756

2303 (7), so long as such self-insurance complies with s. 324.032(3)
2304 ~~s. 324.032(2)~~ and provides the limits of liability required by
2305 subsection (7).

2306 Section 53. Paragraph (a) of subsection (2) of section
2307 627.749, Florida Statutes, is amended to read:

2308 627.749 Autonomous vehicles; insurance requirements.-

2309 (2) INSURANCE REQUIREMENTS.-

2310 (a) A fully autonomous vehicle with the automated driving
2311 system engaged while logged on to an on-demand autonomous
2312 vehicle network or engaged in a prearranged ride must be covered
2313 by a policy of automobile insurance which provides:

2314 1. Primary liability coverage of at least \$1 million for
2315 death, bodily injury, and property damage.

2316 2. ~~Personal injury protection benefits that meet the~~
2317 ~~minimum coverage amounts required under ss. 627.730-627.7405.~~

2318 ~~3.~~ Uninsured and underinsured vehicle coverage as required
2319 by s. 627.727.

2320 Section 54. Section 627.8405, Florida Statutes, is amended
2321 to read:

2322 627.8405 Prohibited acts; financing companies.-~~A~~ ~~No~~ premium
2323 finance company ~~shall~~, in a premium finance agreement or other
2324 agreement, may not finance the cost of or otherwise provide for
2325 the collection or remittance of dues, assessments, fees, or
2326 other periodic payments of money for the cost of:

2327 (1) A membership in an automobile club. The term
2328 "automobile club" means a legal entity that ~~which~~, in
2329 consideration of dues, assessments, or periodic payments of
2330 money, promises its members or subscribers to assist them in
2331 matters relating to the ownership, operation, use, or



824756

2332 maintenance of a motor vehicle; however, the term ~~this~~
2333 ~~definition of "automobile club"~~ does not include persons,
2334 associations, or corporations ~~which are~~ organized and operated
2335 solely for the purpose of conducting, sponsoring, or sanctioning
2336 motor vehicle races, exhibitions, or contests upon racetracks,
2337 or upon racecourses established and marked as such for the
2338 duration of such particular events. As used in this subsection,
2339 the term ~~words~~ "motor vehicle" has ~~used herein have~~ the same
2340 meaning as ~~defined~~ in chapter 320.

2341 (2) An accidental death and dismemberment policy sold in
2342 combination with a policy providing only bodily injury liability
2343 coverage ~~personal injury protection~~ and property damage
2344 liability coverage ~~only policy~~.

2345 (3) Any product not regulated under ~~the provisions of~~ this
2346 insurance code.

2347
2348 This section also applies to premium financing by any insurance
2349 agent or insurance company under part XVI. The commission shall
2350 adopt rules to assure disclosure, at the time of sale, of
2351 coverages financed ~~with personal injury protection~~ and shall
2352 prescribe the form of such disclosure.

2353 Section 55. Subsection (1) of section 627.915, Florida
2354 Statutes, is amended to read:

2355 627.915 Insurer experience reporting.—

2356 (1) Each insurer transacting private passenger automobile
2357 insurance in this state shall report certain information
2358 annually to the office. The information will be due on or before
2359 July 1 of each year. The information must ~~shall~~ be divided into
2360 the following categories: bodily injury liability; property



824756

2361 damage liability; uninsured motorist; ~~personal injury protection~~
2362 ~~benefits~~; medical payments; and comprehensive and collision. The
2363 information given must ~~shall~~ be on direct insurance writings in
2364 the state alone and ~~shall~~ represent total limits data. The
2365 information set forth in paragraphs (a)-(f) is applicable to
2366 voluntary private passenger and Joint Underwriting Association
2367 private passenger writings and must ~~shall~~ be reported for each
2368 of the latest 3 calendar-accident years, with an evaluation date
2369 of March 31 of the current year. The information set forth in
2370 paragraphs (g)-(j) is applicable to voluntary private passenger
2371 writings and must ~~shall~~ be reported on a calendar-accident year
2372 basis ultimately seven times at seven different stages of
2373 development.

2374 (a) Premiums earned for the latest 3 calendar-accident
2375 years.

2376 (b) Loss development factors and the historic development
2377 of those factors.

2378 (c) Policyholder dividends incurred.

2379 (d) Expenses for other acquisition and general expense.

2380 (e) Expenses for agents' commissions and taxes, licenses,
2381 and fees.

2382 (f) Profit and contingency factors as utilized in the
2383 insurer's automobile rate filings for the applicable years.

2384 (g) Losses paid.

2385 (h) Losses unpaid.

2386 (i) Loss adjustment expenses paid.

2387 (j) Loss adjustment expenses unpaid.

2388 Section 56. Subsections (2) and (3) of section 628.909,
2389 Florida Statutes, are amended to read:



824756

2390 628.909 Applicability of other laws.—
2391 (2) The following provisions of the Florida Insurance Code
2392 apply to captive insurance companies that ~~who~~ are not industrial
2393 insured captive insurance companies to the extent that such
2394 provisions are not inconsistent with this part:
2395 (a) Chapter 624, except for ss. 624.407, 624.408, 624.4085,
2396 624.40851, 624.4095, 624.411, 624.425, and 624.426.
2397 (b) Chapter 625, part II.
2398 (c) Chapter 626, part IX.
2399 (d) ~~Sections 627.730-627.7405, when no fault coverage is~~
2400 ~~provided.~~
2401 ~~(e) Chapter 628.~~
2402 (3) The following provisions of the Florida Insurance Code
2403 ~~shall~~ apply to industrial insured captive insurance companies to
2404 the extent that such provisions are not inconsistent with this
2405 part:
2406 (a) Chapter 624, except for ss. 624.407, 624.408, 624.4085,
2407 624.40851, 624.4095, 624.411, 624.425, 624.426, and 624.609(1).
2408 (b) Chapter 625, part II, if the industrial insured captive
2409 insurance company is incorporated in this state.
2410 (c) Chapter 626, part IX.
2411 (d) ~~Sections 627.730-627.7405 when no fault coverage is~~
2412 ~~provided.~~
2413 ~~(e) Chapter 628, except for ss. 628.341, 628.351, and~~
2414 ~~628.6018.~~
2415 Section 57. Subsections (2), (6), and (7) of section
2416 705.184, Florida Statutes, are amended to read:
2417 705.184 Derelict or abandoned motor vehicles on the
2418 premises of public-use airports.—



824756

2419 (2) The airport director or the director's designee shall
2420 contact the Department of Highway Safety and Motor Vehicles to
2421 notify that department that the airport has possession of the
2422 abandoned or derelict motor vehicle and to determine the name
2423 and address of the owner of the motor vehicle, the insurance
2424 company insuring the motor vehicle, ~~notwithstanding the~~
2425 ~~provisions of s. 627.736,~~ and any person who has filed a lien on
2426 the motor vehicle. Within 7 business days after receipt of the
2427 information, the director or the director's designee shall send
2428 notice by certified mail, return receipt requested, to the owner
2429 of the motor vehicle, the insurance company insuring the motor
2430 vehicle, ~~notwithstanding the provisions of s. 627.736,~~ and all
2431 persons of record claiming a lien against the motor vehicle. The
2432 notice must ~~shall~~ state the fact of possession of the motor
2433 vehicle, that charges for reasonable towing, storage, and
2434 parking fees, if any, have accrued and the amount thereof, that
2435 a lien as provided in subsection (6) will be claimed, that the
2436 lien is subject to enforcement pursuant to law, that the owner
2437 or lienholder, if any, has the right to a hearing as set forth
2438 in subsection (4), and that any motor vehicle which, at the end
2439 of 30 calendar days after receipt of the notice, has not been
2440 removed from the airport upon payment in full of all accrued
2441 charges for reasonable towing, storage, and parking fees, if
2442 any, may be disposed of as provided in s. 705.182(2) (a), (b),
2443 (d), or (e), including, but not limited to, the motor vehicle
2444 being sold free of all prior liens after 35 calendar days after
2445 the time the motor vehicle is stored if any prior liens on the
2446 motor vehicle are more than 5 years of age or after 50 calendar
2447 days after the time the motor vehicle is stored if any prior



824756

2448 liens on the motor vehicle are 5 years of age or less.

2449 (6) The airport pursuant to this section or, if used, a
2450 licensed independent wrecker company pursuant to s. 713.78 shall
2451 have a lien on an abandoned or derelict motor vehicle for all
2452 reasonable towing, storage, and accrued parking fees, if any,
2453 except that no storage fee may ~~shall~~ be charged if the motor
2454 vehicle is stored less than 6 hours. As a prerequisite to
2455 perfecting a lien under this section, the airport director or
2456 the director's designee must serve a notice in accordance with
2457 subsection (2) on the owner of the motor vehicle, the insurance
2458 company insuring the motor vehicle, ~~notwithstanding the~~
2459 ~~provisions of s. 627.736,~~ and all persons of record claiming a
2460 lien against the motor vehicle. If attempts to notify the owner,
2461 the insurance company insuring the motor vehicle,
2462 ~~notwithstanding the provisions of s. 627.736,~~ or lienholders are
2463 not successful, the requirement of notice by mail shall be
2464 considered met. Serving of the notice does not dispense with
2465 recording the claim of lien.

2466 (7) (a) For the purpose of perfecting its lien under this
2467 section, the airport shall record a claim of lien which states
2468 ~~shall state:~~

2469 1. The name and address of the airport.

2470 2. The name of the owner of the motor vehicle, the
2471 insurance company insuring the motor vehicle, ~~notwithstanding~~
2472 ~~the provisions of s. 627.736,~~ and all persons of record claiming
2473 a lien against the motor vehicle.

2474 3. The costs incurred from reasonable towing, storage, and
2475 parking fees, if any.

2476 4. A description of the motor vehicle sufficient for



824756

2477 identification.

2478 (b) The claim of lien must ~~shall~~ be signed and sworn to or
2479 affirmed by the airport director or the director's designee.

2480 (c) The claim of lien is ~~shall be~~ sufficient if it is in
2481 substantially the following form:

2482

2483 CLAIM OF LIEN

2484 State of

2485 County of

2486 Before me, the undersigned notary public, personally appeared
2487, who was duly sworn and says that he/she is the
2488 of, whose address is.....; and that the
2489 following described motor vehicle:

2490 ...(Description of motor vehicle)...

2491 owned by, whose address is, has accrued
2492 \$..... in fees for a reasonable tow, for storage, and for
2493 parking, if applicable; that the lienor served its notice to the
2494 owner, the insurance company insuring the motor vehicle
2495 ~~notwithstanding the provisions of s. 627.736, Florida Statutes,~~
2496 and all persons of record claiming a lien against the motor
2497 vehicle on, ...(year)...., by.....

2498 ...(Signature)...

2499 Sworn to (or affirmed) and subscribed before me this day of
2500, ...(year)...., by ...(name of person making statement)....

2501 ...(Signature of Notary Public).....(Print, Type, or Stamp

2502 Commissioned name of Notary Public)...

2503 Personally Known....OR Produced....as identification.

2504

2505 However, the negligent inclusion or omission of any information



824756

2506 in this claim of lien which does not prejudice the owner does
2507 not constitute a default that operates to defeat an otherwise
2508 valid lien.

2509 (d) The claim of lien must ~~shall~~ be served on the owner of
2510 the motor vehicle, the insurance company insuring the motor
2511 vehicle, ~~notwithstanding the provisions of s. 627.736,~~ and all
2512 persons of record claiming a lien against the motor vehicle. If
2513 attempts to notify the owner, the insurance company insuring the
2514 motor vehicle ~~notwithstanding the provisions of s. 627.736,~~ or
2515 lienholders are not successful, the requirement of notice by
2516 mail shall be considered met. The claim of lien must ~~shall~~ be so
2517 served before recordation.

2518 (e) The claim of lien must ~~shall~~ be recorded with the clerk
2519 of court in the county where the airport is located. The
2520 recording of the claim of lien shall be constructive notice to
2521 all persons of the contents and effect of such claim. The lien
2522 attaches ~~shall attach~~ at the time of recordation and takes ~~shall~~
2523 ~~take~~ priority as of that time.

2524 Section 58. Subsection (4) of section 713.78, Florida
2525 Statutes, is amended to read:

2526 713.78 Liens for recovering, towing, or storing vehicles
2527 and vessels.—

2528 (4) (a) A person regularly engaged in the business of
2529 recovering, towing, or storing vehicles or vessels who comes
2530 into possession of a vehicle or vessel pursuant to subsection
2531 (2), and who claims a lien for recovery, towing, or storage
2532 services, shall give notice, by certified mail, to the
2533 registered owner, the insurance company insuring the vehicle
2534 ~~notwithstanding s. 627.736,~~ and all persons claiming a lien



824756

2535 thereon, as disclosed by the records in the Department of
2536 Highway Safety and Motor Vehicles or as disclosed by the records
2537 of any corresponding agency in any other state in which the
2538 vehicle is identified through a records check of the National
2539 Motor Vehicle Title Information System or an equivalent
2540 commercially available system as being titled or registered.

2541 (b) Whenever a law enforcement agency authorizes the
2542 removal of a vehicle or vessel or whenever a towing service,
2543 garage, repair shop, or automotive service, storage, or parking
2544 place notifies the law enforcement agency of possession of a
2545 vehicle or vessel pursuant to s. 715.07(2)(a)2., the law
2546 enforcement agency of the jurisdiction where the vehicle or
2547 vessel is stored shall contact the Department of Highway Safety
2548 and Motor Vehicles, or the appropriate agency of the state of
2549 registration, if known, within 24 hours through the medium of
2550 electronic communications, giving the full description of the
2551 vehicle or vessel. Upon receipt of the full description of the
2552 vehicle or vessel, the department shall search its files to
2553 determine the owner's name, the insurance company insuring the
2554 vehicle or vessel, and whether any person has filed a lien upon
2555 the vehicle or vessel as provided in s. 319.27(2) and (3) and
2556 notify the applicable law enforcement agency within 72 hours.
2557 The person in charge of the towing service, garage, repair shop,
2558 or automotive service, storage, or parking place shall obtain
2559 such information from the applicable law enforcement agency
2560 within 5 days after the date of storage and shall give notice
2561 pursuant to paragraph (a). The department may release the
2562 insurance company information to the requestor notwithstanding
2563 ~~s. 627.736.~~



824756

2564 (c) The notice of lien must be sent by certified mail to
2565 the registered owner, the insurance company insuring the vehicle
2566 notwithstanding ~~s. 627.736~~, and all other persons claiming a
2567 lien thereon within 7 business days, excluding Saturday and
2568 Sunday, after the date of storage of the vehicle or vessel.
2569 However, in no event shall the notice of lien be sent less than
2570 30 days before the sale of the vehicle or vessel. The notice
2571 must state:

2572 1. If the claim of lien is for a vehicle, the last 8 digits
2573 of the vehicle identification number of the vehicle subject to
2574 the lien, or, if the claim of lien is for a vessel, the hull
2575 identification number of the vessel subject to the lien, clearly
2576 printed in the delivery address box and on the outside of the
2577 envelope sent to the registered owner and all other persons
2578 claiming an interest therein or lien thereon.

2579 2. The name, physical address, and telephone number of the
2580 lienor, and the entity name, as registered with the Division of
2581 Corporations, of the business where the towing and storage
2582 occurred, which must also appear on the outside of the envelope
2583 sent to the registered owner and all other persons claiming an
2584 interest in or lien on the vehicle or vessel.

2585 3. The fact of possession of the vehicle or vessel.

2586 4. The name of the person or entity that authorized the
2587 lienor to take possession of the vehicle or vessel.

2588 5. That a lien as provided in subsection (2) is claimed.

2589 6. That charges have accrued and include an itemized
2590 statement of the amount thereof.

2591 7. That the lien is subject to enforcement under law and
2592 that the owner or lienholder, if any, has the right to a hearing



824756

2593 as set forth in subsection (5).

2594 8. That any vehicle or vessel that remains unclaimed, or
2595 for which the charges for recovery, towing, or storage services
2596 remain unpaid, may be sold free of all prior liens 35 days after
2597 the vehicle or vessel is stored by the lienor if the vehicle or
2598 vessel is more than 3 years of age or 50 days after the vehicle
2599 or vessel is stored by the lienor if the vehicle or vessel is 3
2600 years of age or less.

2601 9. The address at which the vehicle or vessel is physically
2602 located.

2603 (d) The notice of lien may not be sent to the registered
2604 owner, the insurance company insuring the vehicle or vessel, and
2605 all other persons claiming a lien thereon less than 30 days
2606 before the sale of the vehicle or vessel.

2607 (e) If attempts to locate the name and address of the owner
2608 or lienholder prove unsuccessful, the towing-storage operator
2609 shall, after 7 business days, excluding Saturday and Sunday,
2610 after the initial tow or storage, notify the public agency of
2611 jurisdiction where the vehicle or vessel is stored in writing by
2612 certified mail or acknowledged hand delivery that the towing-
2613 storage company has been unable to locate the name and address
2614 of the owner or lienholder and a physical search of the vehicle
2615 or vessel has disclosed no ownership information and a good
2616 faith effort has been made, including records checks of the
2617 Department of Highway Safety and Motor Vehicles database and the
2618 National Motor Vehicle Title Information System or an equivalent
2619 commercially available system. For purposes of this paragraph
2620 and subsection (9), the term "good faith effort" means that the
2621 following checks have been performed by the company to establish



824756

2622 the prior state of registration and for title:

2623 1. A check of the department's database for the owner and
2624 any lienholder.

2625 2. A check of the electronic National Motor Vehicle Title
2626 Information System or an equivalent commercially available
2627 system to determine the state of registration when there is not
2628 a current registration record for the vehicle or vessel on file
2629 with the department.

2630 3. A check of the vehicle or vessel for any type of tag,
2631 tag record, temporary tag, or regular tag.

2632 4. A check of the law enforcement report for a tag number
2633 or other information identifying the vehicle or vessel, if the
2634 vehicle or vessel was towed at the request of a law enforcement
2635 officer.

2636 5. A check of the trip sheet or tow ticket of the tow truck
2637 operator to determine whether a tag was on the vehicle or vessel
2638 at the beginning of the tow, if a private tow.

2639 6. If there is no address of the owner on the impound
2640 report, a check of the law enforcement report to determine
2641 whether an out-of-state address is indicated from driver license
2642 information.

2643 7. A check of the vehicle or vessel for an inspection
2644 sticker or other stickers and decals that may indicate a state
2645 of possible registration.

2646 8. A check of the interior of the vehicle or vessel for any
2647 papers that may be in the glove box, trunk, or other areas for a
2648 state of registration.

2649 9. A check of the vehicle for a vehicle identification
2650 number.



824756

2651 10. A check of the vessel for a vessel registration number.

2652 11. A check of the vessel hull for a hull identification
2653 number which should be carved, burned, stamped, embossed, or
2654 otherwise permanently affixed to the outboard side of the
2655 transom or, if there is no transom, to the outmost seaboard side
2656 at the end of the hull that bears the rudder or other steering
2657 mechanism.

2658 Section 59. Section 768.852, Florida Statutes, is created
2659 to read:

2660 768.852 Setoff on damages as a result of a motor vehicle
2661 crash while uninsured.-

2662 (1) Except as provided in subsection (2), for any award of
2663 noneconomic damages, a defendant is entitled to a setoff equal
2664 to \$10,000 if a person suffers injury while operating a motor
2665 vehicle as defined in s. 324.022(2) which lacked the coverage
2666 required by s. 324.022(1) and the person was not in compliance
2667 with s. 324.022(1) for more than 30 days immediately preceding
2668 the crash.

2669 (2) The setoff on noneconomic damages in subsection (1)
2670 does not apply if the person who is liable for the injury:

2671 (a) Was driving while under the influence of an alcoholic
2672 beverage, an inhalant, or a controlled substance;

2673 (b) Acted intentionally, recklessly, or with gross
2674 negligence;

2675 (c) Fled from the scene of the crash; or

2676 (d) Was acting in furtherance of an offense or in immediate
2677 flight from an offense that constituted a felony at the time of
2678 the crash.

2679 (3) This section does not apply to any wrongful death



2680 claim.

2681

2682 ===== T I T L E A M E N D M E N T =====

2683 And the title is amended as follows:

2684 Delete lines 41 - 282

2685 and insert:

2686 insurer's duty to defend certain claims; revising the
2687 vehicles excluded from the definition of the term
2688 "motor vehicle"; providing security requirements for
2689 certain excluded vehicles; specifying circumstances
2690 when motorcycles are subject to financial
2691 responsibility requirements; conforming provisions to
2692 changes made by the act; conforming cross-references;
2693 amending s. 324.0221, F.S.; revising coverages that
2694 subject a policy to certain insurer reporting and
2695 notice requirements; conforming provisions to changes
2696 made by the act; creating s. 324.0222, F.S.; providing
2697 that driver license or registration suspensions for
2698 failure to maintain required security which were in
2699 effect before a specified date remain in full force
2700 and effect; providing that such suspended licenses or
2701 registrations may be reinstated as provided in a
2702 specified section; amending s. 324.023, F.S.;

2703 conforming cross-references; making technical changes;
2704 amending s. 324.031, F.S.; specifying a method of
2705 proving financial responsibility; revising the amount
2706 of a certificate of deposit required to elect a
2707 certain method of proof of financial responsibility;
2708 revising excess liability coverage requirements for a



824756

2709 person electing to use such method; amending s.
2710 324.032, F.S.; revising financial responsibility
2711 requirements for owners or lessees of for-hire
2712 passenger transportation vehicles; amending s.
2713 324.051, F.S.; specifying that motor vehicles include
2714 motorcycles for purposes of the section; making
2715 technical changes; amending ss. 324.071 and 324.091,
2716 F.S.; making technical changes; amending s. 324.151,
2717 F.S.; revising requirements for motor vehicle
2718 liability insurance policies relating to coverage, and
2719 exclusion from coverage, for certain drivers and
2720 vehicles; defining terms; conforming provisions to
2721 changes made by the act; making technical changes;
2722 amending s. 324.161, F.S.; revising requirements for a
2723 certificate of deposit that is required if a person
2724 elects a certain method of proving financial
2725 responsibility; amending s. 324.171, F.S.; revising
2726 the minimum net worth requirements to qualify certain
2727 persons as self-insurers; conforming provisions to
2728 changes made by the act; amending s. 324.251, F.S.;
2729 revising the short title and an effective date;
2730 amending s. 400.9905, F.S.; revising the definition of
2731 the term "clinic"; amending ss. 400.991 and 400.9935,
2732 F.S.; conforming provisions to changes made by the
2733 act; amending s. 409.901, F.S.; revising the
2734 definition of the term "third-party benefit"; amending
2735 s. 409.910, F.S.; revising the definition of the term
2736 "medical coverage"; amending s. 456.057, F.S.;
2737 conforming a provision to changes made by the act;



824756

2738 amending s. 456.072, F.S.; revising specified grounds
2739 for discipline for certain health professions;
2740 defining the term "upcoded"; amending s. 624.155,
2741 F.S.; providing an exception to the circumstances
2742 under which a person who is damaged may bring a civil
2743 action against an insurer; adding a cause of action
2744 against insurers in certain circumstances; providing
2745 that a person is not entitled to judgments under
2746 multiple bad faith remedies; creating s. 624.156,
2747 F.S.; providing that the section applies to bad faith
2748 failure to settle third-party claim actions against
2749 any insurer for a loss arising out of the ownership,
2750 maintenance, or use of a motor vehicle under specified
2751 circumstances; providing construction; providing that
2752 insurers have a duty of good faith; providing
2753 construction; defining the term "bad faith failure to
2754 settle"; specifying best practices standards for
2755 insurers upon receiving actual notice of certain
2756 incidents or losses; providing construction;
2757 specifying certain requirements for insurer
2758 communications to an insured; requiring an insurer to
2759 initiate settlement negotiations under certain
2760 circumstances; specifying requirements for the insurer
2761 when multiple claims arise out of a single occurrence
2762 under certain conditions; providing construction;
2763 requiring an insurer to attempt to settle a claim on
2764 behalf of certain insureds under certain
2765 circumstances; providing for a defense to bad faith
2766 actions; providing that insureds have a duty to



824756

2767 cooperate; requiring an insured to take certain
2768 reasonable actions necessary to settle covered claims;
2769 providing requirements for disclosures by insureds;
2770 requiring insurers to provide certain notice to
2771 insureds within a specified timeframe; providing that
2772 insurers may terminate certain defenses under certain
2773 circumstances; providing construction; providing that
2774 a trier of fact may not attribute an insurer's failure
2775 to settle certain claims to specified causes under
2776 certain circumstances; providing construction;
2777 specifying conditions precedent for claimants filing
2778 bad faith failure to settle third-party claim actions;
2779 providing that an insurer is entitled to a reasonable
2780 opportunity to investigate and evaluate claims under
2781 certain circumstances; providing construction;
2782 providing that insurers may not be held liable for the
2783 failure to accept a settlement offer within a certain
2784 timeframe if certain conditions are met; providing
2785 that an insurer is not required to automatically
2786 tender policy limits within a certain timeframe in
2787 every case; requiring the party bringing a bad faith
2788 failure to settle action to prove every element by the
2789 greater weight of the evidence; specifying burdens of
2790 proof for insurers relying on specified defenses;
2791 limiting damages under certain circumstances;
2792 providing that judgment creditors must be subrogated
2793 to the rights of the insured under certain
2794 circumstances; prohibiting multiple bad faith
2795 remedies; amending s. 626.9541, F.S.; conforming a



824756

2796 provision to changes made by the act; revising the
2797 type of insurance coverage applicable to a certain
2798 prohibited act; amending s. 626.989, F.S.; revising
2799 the definition of the term "fraudulent insurance act";
2800 amending s. 627.06501, F.S.; revising coverages that
2801 may provide for a reduction in motor vehicle insurance
2802 policy premium charges under certain circumstances;
2803 amending s. 627.0651, F.S.; specifying requirements
2804 for rate filings for motor vehicle liability policies
2805 submitted to the Office of Insurance Regulation
2806 implementing requirements in effect on a specified
2807 date; requiring such filings to be approved through a
2808 certain process; amending s. 627.0652, F.S.; revising
2809 coverages that must provide a premium charge reduction
2810 under certain circumstances; amending s. 627.0653,
2811 F.S.; revising coverages subject to premium discounts
2812 for specified motor vehicle equipment; amending s.
2813 627.4132, F.S.; revising coverages that are subject to
2814 a stacking prohibition; amending s. 627.4137, F.S.;
2815 requiring that insurers disclose certain information
2816 at the request of a claimant's attorney; authorizing a
2817 claimant to file an action under certain
2818 circumstances; providing for the award of reasonable
2819 attorney fees and costs under certain circumstances;
2820 amending s. 627.7263, F.S.; revising coverages that
2821 are deemed primary, except under certain
2822 circumstances, for the lessor of a motor vehicle for
2823 lease or rent; revising a notice that is required if
2824 the lessee's coverage is to be primary; creating s.



824756

2825 627.7265, F.S.; specifying persons whom medical
2826 payments coverage must protect; specifying the minimum
2827 medical expense and death benefit limits; specifying
2828 coverage options an insurer is required and authorized
2829 to offer; providing that each motor vehicle insurance
2830 policy furnished as proof of financial responsibility
2831 is deemed to have certain coverages; requiring that
2832 certain rejections or selections be made on forms
2833 approved by the office; providing requirements for
2834 such forms; providing that certain coverage is not
2835 required to be provided in certain policies under
2836 certain circumstances; requiring insurers to provide
2837 certain notices to policyholders; providing
2838 construction relating to limits on certain other
2839 coverages; requiring insurers, upon receiving certain
2840 notice of an accident, to hold a specified reserve for
2841 certain purposes for a certain timeframe; providing
2842 that the reserve requirement does not require insurers
2843 to establish a claim reserve for accounting purposes;
2844 specifying that an insurer providing medical payments
2845 coverage benefits may not seek a lien on a certain
2846 recovery and may not bring a certain cause of action;
2847 authorizing insurers to include policy provisions
2848 allowing for subrogation, under certain circumstances,
2849 for medical payments benefits paid; providing
2850 construction; specifying a requirement for an insured
2851 for repayment of medical payments benefits under
2852 certain circumstances; prohibiting insurers from
2853 including policy provisions allowing for subrogation



824756

2854 for death benefits paid; amending s. 627.727, F.S.;

2855 revising the legal liability of an uninsured motorist

2856 coverage insurer; conforming provisions to changes

2857 made by the act; amending s. 627.7275, F.S.; revising

2858 required coverages for a motor vehicle insurance

2859 policy; conforming provisions to changes made by the

2860 act; creating s. 627.7278, F.S.; defining the term

2861 "minimum security requirements"; providing

2862 requirements, applicability, and construction relating

2863 to motor vehicle insurance policies as of a certain

2864 date; requiring insurers to allow certain insureds to

2865 make certain coverage changes, subject to certain

2866 conditions; requiring an insurer to provide, by a

2867 specified date, a specified notice to policyholders

2868 relating to requirements under the act; amending s.

2869 627.728, F.S.; conforming a provision to changes made

2870 by the act; making technical changes; amending s.

2871 627.7295, F.S.; revising the definitions of the terms

2872 "policy" and "binder"; revising the coverages of a

2873 motor vehicle insurance policy for which a licensed

2874 general lines agent may charge a specified fee;

2875 conforming provisions to changes made by the act;

2876 amending s. 627.7415, F.S.; revising additional

2877 liability insurance requirements for commercial motor

2878 vehicles; creating s. 627.747, F.S.; providing that

2879 private passenger motor vehicle policies may exclude

2880 certain identified individuals from specified

2881 coverages under certain circumstances; providing that

2882 such policies may not exclude coverage under certain



824756

2883 circumstances; amending s. 627.748, F.S.; revising
2884 insurance requirements for transportation network
2885 company drivers; conforming provisions to changes made
2886 by the act; amending s. 627.749, F.S.; conforming a
2887 provision to changes made by the act; amending s.
2888 627.8405, F.S.; revising coverages in a policy sold in
2889 combination with an accidental death and dismemberment
2890 policy which a premium finance company may not
2891 finance; revising rulemaking authority of the
2892 Financial Services Commission; amending ss. 627.915,
2893 628.909, 705.184, and 713.78, F.S.; conforming
2894 provisions to changes made by the act; making
2895 technical changes; creating s. 768.852, F.S.;
2896 providing for a setoff on certain damages that may be
2897 recovered by a person operating certain motor vehicles
2898 who is not in compliance with financial responsibility
2899 laws; providing exceptions; amending s. 817.234, F.S.;
2900 revising