

By the Committee on Banking and Insurance; and Senator Boyd

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1 A bill to be entitled
2 An act relating to the Department of Financial
3 Services; repealing s. 17.0315, F.S., relating to the
4 financial and cash management system and task force;
5 amending s. 48.151, F.S.; providing an exception to
6 service of process on public entities under certain
7 circumstances; deleting the Chief Financial Officer's
8 assistant or deputy or another person in charge of the
9 office as agents for service of process on insurers;
10 requiring the Department of Financial Services to
11 create a secure online portal as the sole means to
12 accept certain service of process; amending s.
13 110.123, F.S.; revising definitions; authorizing
14 specified persons relating to the Division of
15 Rehabilitation and Liquidation to purchase coverage in
16 a state group health insurance plan at specified
17 premium costs; providing that the enrollment period
18 for the state group insurance program begins with a
19 specified plan year for certain persons relating to
20 the division; amending s. 110.131, F.S.; conforming a
21 cross-reference; amending s. 120.541, F.S.; revising
22 applicability of certain provisions relating to a
23 specified proposed rule; amending s. 215.34, F.S.;
24 deleting the requirement for specified entities
25 receiving certain charged-back items to prepare a
26 journal transfer; amending s. 215.93, F.S.; renaming a
27 subsystem of the Florida Financial Management
28 Information System; amending s. 215.94, F.S.;
29 conforming a provision to changes made by the act;

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30 amending s. 216.102, F.S.; making technical changes;
31 amending s. 218.32, F.S.; revising legislative intent;
32 providing functions of the Florida Open Financial
33 Statement System; requiring local governments to use
34 the system to file specified reports; providing
35 requirements for the system; revising the list of
36 entities with which the Chief Financial Officer may
37 consult with regard to the system; authorizing, rather
38 than requiring, certain local governmental financial
39 statements to be filed in a specified format; deleting
40 certain requirements for such statements; providing
41 construction; providing an exception; creating s.
42 395.1061, F.S.; defining terms; requiring certain
43 hospitals to demonstrate financial responsibility for
44 maintaining professional liability coverage;
45 specifying requirements for such financial
46 responsibility; requiring hospitals to provide
47 evidence of compliance and to remain in compliance;
48 prohibiting the Agency for Health Care Administration
49 from issuing or renewing licenses of hospitals under
50 certain circumstances; providing exemptions from
51 professional liability coverage requirements;
52 authorizing hospital systems to meet such professional
53 liability coverage requirements in a specified manner;
54 amending s. 414.40, F.S.; transferring the Stop Inmate
55 Fraud Program from the Department of Financial
56 Services to the Department of Economic Opportunity;
57 authorizing the program to provide reports of certain
58 data to the Division of Public Assistance Fraud for a

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59 specified purpose; amending s. 440.02, F.S.; revising
60 the definition of the term "employer"; amending s.
61 440.05, F.S.; revising information that must be
62 submitted with the notice of election to be exempt
63 from workers' compensation coverage; specifying the
64 circumstances under which the Department of Financial
65 Services is required to send certain notifications to
66 workers' compensation carriers; requiring such
67 notifications to be electronic; requiring certificates
68 of election to be exempt to contain a specified
69 notice; deleting a provision requiring certain
70 corporation officers to maintain business records;
71 revising applicability of certificates of election to
72 be exempt; amending s. 440.107, F.S.; revising the
73 timeframe for certain employers to produce specified
74 records under certain circumstances; prohibiting
75 employers who failed to secure payment of workers'
76 compensation from entering a payment agreement
77 schedule with the department unless a specified
78 condition is met; revising circumstances that result
79 in immediate reinstatement of stop-work orders;
80 revising penalty assessments; amending s. 440.13,
81 F.S.; revising statewide schedules of maximum
82 reimbursement allowances for medically necessary
83 treatment, care, and attendance; authorizing the
84 department to adopt rules; amending s. 440.185, F.S.;
85 revising the timeline and methods for workers'
86 compensation carriers to send a certain informational
87 brochure to injured workers; revising methods by which

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88 such informational brochure is sent to employers;
89 amending s. 440.381, F.S.; specifying workers'
90 compensation policies that require physical onsite
91 audits for a specified class; amending s. 497.277,
92 F.S.; deleting a cap on transferring burial rights
93 fees; amending s. 497.369, F.S.; revising requirements
94 for licenses by endorsement to practice embalming;
95 amending s. 497.372, F.S.; revising the scope of
96 funeral directing practice; amending s. 497.374, F.S.;
97 revising requirements for licenses by endorsement to
98 practice funeral directing; amending s. 554.108, F.S.;
99 requiring boilers manufactured after a specified date,
100 rather than boilers of certain heat input, to be
101 stamped with a specified code symbol; revising the
102 boilers' information that must be filed; requiring
103 that specified spaces and rooms be equipped with
104 carbon monoxide detector devices; amending s. 554.111,
105 F.S.; deleting a requirement for a specified fee for a
106 certificate of competency; requiring applications for
107 boiler permits to include a specified report; revising
108 the purpose for special trips that the department is
109 required to make for boiler inspections; amending s.
110 554.114, F.S.; revising the schedules of penalties
111 against boiler insurance companies, inspection
112 agencies, and other persons for specified violations;
113 amending s. 624.307, F.S.; providing that certain
114 regulated persons or unauthorized insurers are
115 required to appoint the Chief Financial Officer as
116 their agents, rather than as their attorneys, to

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117 receive service of legal process; revising the method
118 by which the Chief Financial Officer makes the process
119 available; requiring the Chief Financial Officer to
120 promptly send notice of receipt of service of process;
121 revising requirements for the contents of such notice;
122 amending s. 624.422, F.S.; requiring insurers to file
123 with the department e-mail addresses, rather than
124 addresses, of specified persons; providing that a
125 specified method by which process is served upon the
126 Chief Financial Officer is the sole method of service;
127 conforming provisions to changes made by the act;
128 amending s. 624.423, F.S.; revising procedures for
129 service of process; requiring the Chief Financial
130 Officer to promptly notify certain persons of the
131 process and to make the process available to such
132 persons through specified means; revising the method
133 by which records are retained; amending s. 624.610,
134 F.S.; conforming provisions to changes made by the
135 act; amending s. 626.015, F.S.; defining the term
136 "licensing authority"; revising the definition of the
137 term "unaffiliated insurance agent"; amending s.
138 626.171, F.S.; requiring fingerprints for certain
139 licenses to be processed in accordance with specified
140 laws; amending s. 626.172, F.S.; revising the method
141 by which fingerprints for applications for insurance
142 agency licenses are submitted; deleting a fingerprint
143 processing fee; creating s. 626.173, F.S.; providing
144 duties for certain insurance agency persons within a
145 specified timeframe after cessation of insurance

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146 transactions; authorizing the department to impose
147 administrative fines against such persons for
148 specified violations; prohibiting the initiation of
149 certain proceedings and imposition of fines until
150 specified prerequisites are completed; providing a cap
151 on such fines; authorizing the department to suspend
152 or revoke licenses under certain circumstances;
153 providing requirements for determining penalties and
154 remedies; amending s. 626.201, F.S.; conforming a
155 provision to changes made by the act; providing
156 continuation of jurisdiction of the licensing
157 authority to investigate and prosecute specified
158 violations under certain circumstances; amending s.
159 626.202, F.S.; conforming provisions to changes made
160 by the act; amending s. 626.221, F.S.; adding a
161 designation to the list of designations that allow
162 applicants for an all-lines adjuster license to be
163 exempt from an examination; amending s. 626.311, F.S.;
164 providing an exception to the prohibition against
165 unaffiliated insurance agents holding appointments
166 from insurers; authorizing certain adjusters to obtain
167 adjuster appointments while maintaining unaffiliated
168 insurance agent appointments and to adjust claims and
169 receive certain compensation; amending ss. 626.321 and
170 626.601, F.S.; conforming provisions to changes made
171 by the act; amending s. 626.7845, F.S.; conforming a
172 cross-reference; amending ss. 626.8411 and 626.8412,
173 F.S.; conforming provisions to changes made by the
174 act; amending s. 626.8417, F.S.; revising requirements

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175 to qualify for title insurance agent licenses;
176 amending s. 626.8421, F.S.; requiring title agencies
177 to have separate appointments under certain
178 circumstances; amending s. 626.843, F.S.; providing
179 requirements for appointments of title insurance
180 agencies; amending s. 626.8433, F.S.; requiring title
181 insurers that terminate appointments of title
182 insurance agencies to file certain information with
183 the department; amending s. 626.8447, F.S.; providing
184 effects of suspension or revocation of title insurance
185 agency licenses; amending s. 626.854, F.S.; revising
186 and providing restrictions on public adjuster
187 compensation; providing exceptions to such
188 restrictions; amending s. 626.8561, F.S.; revising the
189 definition of the term "public adjuster apprentice";
190 amending s. 626.865, F.S.; revising requirements to
191 qualify for public adjuster licenses; requiring that
192 certain bonds remain in effect for a specified period
193 after expiration of the license; amending s. 626.8651,
194 F.S.; requiring that certain bonds remain in effect
195 for a specified period after expiration of a public
196 adjuster apprentice license; revising requirements for
197 public adjuster apprentices to be, act as, or hold
198 themselves out to be public adjuster apprentices;
199 amending s. 626.8696, F.S.; revising requirements for
200 adjusting firm license applications; amending s.
201 626.8732, F.S.; requiring applicants for nonresident
202 public adjuster licenses to maintain certain bonds
203 after the expiration or termination of licenses;

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204 amending ss. 626.8734, 626.906, 626.912, 626.937, and
205 626.9953, F.S.; conforming provisions to changes made
206 by the act; amending s. 633.135, F.S.; providing
207 additional uses for firefighter funds; amending s.
208 633.216, F.S.; revising requirements for renewal of
209 firesafety inspector certificates; amending s.
210 633.408, F.S.; revising requirements for the issuance
211 of a Firefighter Certificate of Compliance and Special
212 Certificate of Compliance; deleting provisions
213 relating to requirements to retain a Special
214 Certificate of Compliance; amending s. 633.414, F.S.;
215 providing requirements to retain a Special Certificate
216 of Compliance; revising requirements to retain a
217 Firefighter Certificate of Compliance; redefining the
218 term "active"; amending ss. 648.34 and 648.355, F.S.;
219 conforming provisions to changes made by the act;
220 amending s. 648.46, F.S.; providing continuation of
221 jurisdiction of the licensing authority to investigate
222 and prosecute specified violations under certain
223 circumstances; amending s. 766.105, F.S.; deleting
224 requirements and procedures for the certification of
225 hospital compliance with the Florida Patient's
226 Compensation Fund; providing that the fund is subject
227 to the supervision and approval of the Chief Financial
228 Officer or his or her designee, rather than the board
229 of governors; conforming provisions to changes made by
230 the act; providing for supervision of the fund until
231 dissolution; specifying duties of the Department of
232 Financial Services before dissolution of the fund;

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233 providing for future repeal; amending ss. 945.6041 and
234 985.6441, F.S.; revising the definition of the term
235 "health care provider"; defining the term "other
236 medical facility"; transferring the Stop Inmate Fraud
237 Program within the Department of Financial Services to
238 the Department of Economic Opportunity by a type two
239 transfer; providing effective dates.

240

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

242

243 Section 1. Section 17.0315, Florida Statutes, is repealed.

244 Section 2. Subsections (1) and (3) of section 48.151,
245 Florida Statutes, are amended to read:

246 48.151 Service on statutory agents for certain persons.—

247 (1) When any law designates a public officer, board,
248 agency, or commission as the agent for service of process on any
249 person, firm, or corporation, service of process thereunder
250 shall be made by leaving one copy of the process with the public
251 officer, board, agency, or commission or in the office thereof,
252 or by mailing one copy to the public officer, board, agency, or
253 commission, except as provided in subsection (3). The public
254 officer, board, agency, or commission so served shall retain a
255 record copy and promptly send the copy served, by registered or
256 certified mail, to the person to be served as shown by his or
257 her or its records. Proof of service on the public officer,
258 board, agency, or commission shall be by a notice accepting the
259 process which shall be issued by the public officer, board,
260 agency, or commission promptly after service and filed in the
261 court issuing the process. The notice accepting service shall

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262 state the date upon which the copy of the process was mailed by
263 the public officer, board, agency, or commission to the person
264 being served and the time for pleading prescribed by the rules
265 of procedure shall run from this date. The service is valid
266 service for all purposes on the person for whom the public
267 officer, board, agency, or commission is statutory agent for
268 service of process.

269 (3) The Chief Financial Officer ~~or his or her assistant or~~
270 ~~deputy or another person in charge of the office~~ is the agent
271 for service of process on all insurers applying for authority to
272 transact insurance in this state, all licensed nonresident
273 insurance agents, all nonresident disability insurance agents
274 licensed pursuant to s. 626.835, any unauthorized insurer under
275 s. 626.906 or s. 626.937, domestic reciprocal insurers,
276 fraternal benefit societies under chapter 632, warranty
277 associations under chapter 634, prepaid limited health service
278 organizations under chapter 636, and persons required to file
279 statements under s. 628.461. ~~As an alternative to service of~~
280 ~~process made by mail or personal service on the Chief Financial~~
281 ~~Officer, on his or her assistant or deputy, or on another person~~
282 ~~in charge of the office,~~ The Department of Financial Services
283 shall may create a secure online portal as the sole means an
284 Internet-based transmission system to accept service of process
285 on the Chief Financial Officer under this section by electronic
286 transmission of documents.

287 Section 3. Present subsections (9) through (13) of section
288 110.123, Florida Statutes, are redesignated as subsections (10)
289 through (14), respectively, a new subsection (9) is added to
290 that section, and paragraphs (b), (c), (f), (h), (i), and (o) of

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291 subsection (2) and paragraph (i) of subsection (5) are amended,
292 to read:

293 110.123 State group insurance program.—

294 (2) DEFINITIONS.—As used in ss. 110.123-110.1239, the term:

295 (b) "Enrollee" means all state officers and employees,
296 retired state officers and employees, surviving spouses of
297 deceased state officers and employees, and terminated employees
298 or individuals with continuation coverage who are enrolled in an
299 insurance plan offered by the state group insurance program. The
300 term "Enrollee" includes all state university officers and
301 employees, retired state university officers and employees,
302 surviving spouses of deceased state university officers and
303 employees, and terminated state university employees or
304 individuals with continuation coverage who are enrolled in an
305 insurance plan offered by the state group insurance program. As
306 used in this paragraph, state employees and retired state
307 employees also include employees and retired employees of the
308 Division of Rehabilitation and Liquidation.

309 (c) "Full-time state employees" means employees of all
310 branches or agencies of state government holding salaried
311 positions who are paid by state warrant or from agency funds and
312 who work or are expected to work an average of at least 30 ~~or~~
313 ~~more~~ hours per week; employees of the Division of Rehabilitation
314 and Liquidation who work or are expected to work an average of
315 at least 30 hours per week; employees paid from regular salary
316 appropriations for 8 months' employment, including university
317 personnel on academic contracts; and employees paid from other-
318 personal-services (OPS) funds as described in subparagraphs 1.
319 and 2. The term includes all full-time employees of the state

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320 universities. The term does not include seasonal workers who are
321 paid from OPS funds.

322 1. For persons hired before April 1, 2013, the term
323 includes any person paid from OPS funds who:

324 a. Has worked an average of at least 30 hours or more per
325 week during the initial measurement period from April 1, 2013,
326 through September 30, 2013; or

327 b. Has worked an average of at least 30 hours or more per
328 week during a subsequent measurement period.

329 2. For persons hired after April 1, 2013, the term includes
330 any person paid from OPS funds who:

331 a. Is reasonably expected to work an average of at least 30
332 hours or more per week; or

333 b. Has worked an average of at least 30 hours or more per
334 week during the person's measurement period.

335 (f) "Part-time state employee" means an employee of any
336 branch or agency of state government paid by state warrant from
337 salary appropriations or from agency funds, or an employee of
338 the Division of Rehabilitation and Liquidation, and who is
339 employed for less than an average of 30 hours per week or, if on
340 academic contract or seasonal or other type of employment which
341 is less than year-round, is employed for less than 8 months
342 during any 12-month period, but does not include a person paid
343 from other-personal-services (OPS) funds. The term includes all
344 part-time employees of the state universities.

345 (h) "Retired state officer or employee" or "retiree" means
346 any state or state university officer or employee, or, beginning
347 with the 2023 plan year, an employee of the Division of
348 Rehabilitation and Liquidation, who retires under a state

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349 retirement system or a state optional annuity or retirement
350 program or is placed on disability retirement, and who was
351 insured under the state group insurance program or the Division
352 of Rehabilitation and Liquidation's group insurance program at
353 the time of retirement, and who begins receiving retirement
354 benefits immediately after retirement from state or state
355 university office or employment. The term also includes any
356 state officer or state employee who retires under the Florida
357 Retirement System Investment Plan established under part II of
358 chapter 121 if he or she:

359 1. Meets the age and service requirements to qualify for
360 normal retirement as set forth in s. 121.021(29); or

361 2. Has attained the age specified by s. 72(t)(2)(A)(i) of
362 the Internal Revenue Code and has 6 years of creditable service.

363 (i) "State agency" or "agency" means any branch,
364 department, or agency of state government. "State agency" or
365 "agency" includes any state university and the Division of
366 Rehabilitation and Liquidation for purposes of this section
367 only.

368 (o) "Surviving spouse" means the widow or widower of a
369 deceased state officer, full-time state employee, part-time
370 state employee, or retiree if such widow or widower was covered
371 as a dependent under the state group health insurance plan,
372 TRICARE supplemental insurance plan, ~~or~~ a health maintenance
373 organization plan established pursuant to this section, or the
374 Division of Rehabilitation and Liquidation's group insurance
375 program at the time of the death of the deceased officer,
376 employee, or retiree. "Surviving spouse" also means any widow or
377 widower who is receiving or eligible to receive a monthly state

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378 warrant from a state retirement system as the beneficiary of a
379 state officer, full-time state employee, or retiree who died
380 prior to July 1, 1979. For the purposes of this section, any
381 such widow or widower shall cease to be a surviving spouse upon
382 his or her remarriage.

383 (5) DEPARTMENT POWERS AND DUTIES.—The department is
384 responsible for the administration of the state group insurance
385 program. The department shall initiate and supervise the program
386 as established by this section and shall adopt such rules as are
387 necessary to perform its responsibilities. To implement this
388 program, the department shall, with prior approval by the
389 Legislature:

390 (i) Contract with a single custodian to provide services
391 necessary to implement and administer the health savings
392 accounts authorized in subsection (13) ~~(12)~~.

393
394 Final decisions concerning enrollment, the existence of
395 coverage, or covered benefits under the state group insurance
396 program shall not be delegated or deemed to have been delegated
397 by the department.

398 (9) COVERAGE AND ENROLLMENT PERIOD FOR EMPLOYEES, RETIREES,
399 AND WIDOWS AND WIDOWERS OF EMPLOYEES AND RETIREES OF THE
400 DIVISION OF REHABILITATION AND LIQUIDATION.—

401 (a) Beginning with the 2023 plan year:

402 1. A retired employee insured under the Division of
403 Rehabilitation and Liquidation's group insurance program, or a
404 widow or widower of an employee or of a retired employee of the
405 Division of Rehabilitation and Liquidation who is covered as a
406 dependent under the Division of Rehabilitation and Liquidation's

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407 group insurance program, may purchase coverage in a state group
408 health insurance plan at the same premium cost as that for a
409 retiree or a surviving spouse, respectively, enrolled in the
410 state group insurance program.

411 2. A terminated employee of the Division of Rehabilitation
412 and Liquidation or an individual with continuation coverage who
413 is insured under the Division of Rehabilitation and
414 Liquidation's group insurance program may purchase coverage in a
415 state group health insurance plan at the same premium cost as
416 that for a terminated employee or an individual with
417 continuation coverage, respectively, enrolled in the state group
418 insurance program.

419 (b) The enrollment period for the state group insurance
420 program begins with the 2023 plan year for:

421 1. Current and retired employees of the Division of
422 Rehabilitation and Liquidation.

423 2. Widows and widowers of employees and of retired
424 employees of the Division of Rehabilitation and Liquidation.

425 3. Terminated employees of the Division of Rehabilitation
426 and Liquidation or individuals with continuation coverage who
427 are insured under the Division of Rehabilitation and
428 Liquidation's group insurance program.

429 Section 4. Subsection (5) of section 110.131, Florida
430 Statutes, is amended to read:

431 110.131 Other-personal-services employment.—

432 (5) Beginning January 1, 2014, an other-personal-services
433 (OPS) employee who has worked an average of at least 30 or more
434 hours per week during the measurement period described in s.
435 110.123(14) (c) or (d) ~~s. 110.123(13) (c) or (d)~~, or who is

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436 reasonably expected to work an average of at least 30 or more
437 hours per week following his or her employment, is eligible to
438 participate in the state group insurance program as provided
439 under s. 110.123.

440 Section 5. Paragraph (d) is added to subsection (4) of
441 section 120.541, Florida Statutes, and paragraph (a) of
442 subsection (2) and subsection (3) of that section are
443 republished, to read:

444 120.541 Statement of estimated regulatory costs.-

445 (2) A statement of estimated regulatory costs shall
446 include:

447 (a) An economic analysis showing whether the rule directly
448 or indirectly:

449 1. Is likely to have an adverse impact on economic growth,
450 private sector job creation or employment, or private sector
451 investment in excess of \$1 million in the aggregate within 5
452 years after the implementation of the rule;

453 2. Is likely to have an adverse impact on business
454 competitiveness, including the ability of persons doing business
455 in the state to compete with persons doing business in other
456 states or domestic markets, productivity, or innovation in
457 excess of \$1 million in the aggregate within 5 years after the
458 implementation of the rule; or

459 3. Is likely to increase regulatory costs, including any
460 transactional costs, in excess of \$1 million in the aggregate
461 within 5 years after the implementation of the rule.

462 (3) If the adverse impact or regulatory costs of the rule
463 exceed any of the criteria established in paragraph (2) (a), the
464 rule shall be submitted to the President of the Senate and

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465 Speaker of the House of Representatives no later than 30 days
466 prior to the next regular legislative session, and the rule may
467 not take effect until it is ratified by the Legislature.

468 (4) Subsection (3) does not apply to the adoption of:

469 (d) Schedules of maximum reimbursement allowances by the
470 three-member panel which are expressly authorized by s. 440.13.

471 Section 6. Subsection (1) of section 215.34, Florida
472 Statutes, is amended to read:

473 215.34 State funds; noncollectible items; procedure.—

474 (1) Any check, draft, or other order for the payment of
475 money in payment of any licenses, fees, taxes, commissions, or
476 charges of any sort authorized to be made under the laws of the
477 state and deposited in the State Treasury as provided herein,
478 which may be returned for any reason by the bank or other payor
479 upon which same shall have been drawn shall be forthwith
480 returned by the Chief Financial Officer for collection to the
481 state officer, the state agency, or the entity of the judicial
482 branch making the deposit. In such case, the Chief Financial
483 Officer may issue a debit memorandum charging an account of the
484 agency, officer, or entity of the judicial branch which
485 originally received the payment. The original of the debit
486 memorandum shall state the reason for the return of the check,
487 draft, or other order and shall accompany the item being
488 returned to the officer, agency, or entity of the judicial
489 branch being charged. The officer, agency, or entity of the
490 judicial branch receiving the charged-back item shall ~~prepare a~~
491 ~~journal transfer which shall~~ debit the charge against the fund
492 or account to which the same shall have been originally
493 credited. Such procedure for handling noncollectible items shall

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494 not be construed as paying funds out of the State Treasury
495 without an appropriation, but shall be considered as an
496 administrative procedure for the efficient handling of state
497 records and accounts.

498 Section 7. Paragraph (c) of subsection (1) of section
499 215.93, Florida Statutes, is amended to read:

500 215.93 Florida Financial Management Information System.—

501 (1) To provide the information necessary to carry out the
502 intent of the Legislature, there shall be a Florida Financial
503 Management Information System. The Florida Financial Management
504 Information System shall be fully implemented and shall be
505 upgraded as necessary to ensure the efficient operation of an
506 integrated financial management information system and to
507 provide necessary information for the effective operation of
508 state government. Upon the recommendation of the coordinating
509 council and approval of the board, the Florida Financial
510 Management Information System may require data from any state
511 agency information system or information subsystem or may
512 request data from any judicial branch information system or
513 information subsystem that the coordinating council and board
514 have determined to have statewide financial management
515 significance. Each functional owner information subsystem within
516 the Florida Financial Management Information System shall be
517 developed in such a fashion as to allow for timely, positive,
518 preplanned, and prescribed data transfers between the Florida
519 Financial Management Information System functional owner
520 information subsystems and from other information systems. The
521 principal unit of the system shall be the functional owner
522 information subsystem, and the system shall include, but shall

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523 not be limited to, the following:

524 (c) Financial ~~Cash~~ Management Subsystem.

525 Section 8. Subsection (3) of section 215.94, Florida
526 Statutes, is amended to read:

527 215.94 Designation, duties, and responsibilities of
528 functional owners.—

529 (3) The Chief Financial Officer shall be the functional
530 owner of the Financial ~~Cash~~ Management Subsystem. The Chief
531 Financial Officer shall design, implement, and operate the
532 subsystem in accordance with the provisions of ss. 215.90-
533 215.96. The subsystem shall include, but shall not be limited
534 to, functions for:

535 (a) Recording and reconciling credits and debits to
536 treasury fund accounts.

537 (b) Monitoring cash levels and activities in state bank
538 accounts.

539 (c) Monitoring short-term investments of idle cash.

540 (d) Administering the provisions of the Federal Cash
541 Management Improvement Act of 1990.

542 Section 9. Subsection (3) of section 216.102, Florida
543 Statutes, is amended to read:

544 216.102 Filing of financial information; handling by Chief
545 Financial Officer; penalty for noncompliance.—

546 (3) The Chief Financial Officer shall:

547 (a) Prepare and furnish to the Auditor General annual
548 financial statements for the state on or before December 31 of
549 each year, using generally accepted accounting principles.

550 (b) Prepare and publish an annual ~~a comprehensive annual~~
551 financial report for the state in accordance with generally

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552 accepted accounting principles on or before February 28 of each
553 year.

554 (c) Furnish the Governor, the President of the Senate, and
555 the Speaker of the House of Representatives with a copy of the
556 annual comprehensive ~~annual~~ financial report prepared pursuant
557 to paragraph (b).

558 (d) Notify each agency and the judicial branch of the data
559 that is required to be recorded to enhance accountability for
560 tracking federal financial assistance.

561 (e) Provide reports, as requested, to executive or judicial
562 branch entities, the President of the Senate, the Speaker of the
563 House of Representatives, and the members of the Florida
564 Congressional Delegation, detailing the federal financial
565 assistance received and disbursed by state agencies and the
566 judicial branch.

567 (f) Consult with and elicit comments from the Executive
568 Office of the Governor on changes to the Florida Accounting
569 Information Resource Subsystem which clearly affect the
570 accounting of federal funds, so as to ensure consistency of
571 information entered into the Federal Aid Tracking System by
572 state executive and judicial branch entities. While efforts
573 shall be made to ensure the compatibility of the Florida
574 Accounting Information Resource Subsystem and the Federal Aid
575 Tracking System, any successive systems serving identical or
576 similar functions shall preserve such compatibility.

577
578 The Chief Financial Officer may furnish and publish in
579 electronic form the financial statements and the annual
580 comprehensive ~~annual~~ financial report required under paragraphs

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581 (a), (b), and (c).

582 Section 10. Paragraph (h) of subsection (1) of section
583 218.32, Florida Statutes, is amended, and paragraph (i) is added
584 to that subsection, to read:

585 218.32 Annual financial reports; local governmental
586 entities.—

587 (1)

588 ~~(h) It is the intent of the Legislature to create The~~
589 ~~Florida Open Financial Statement System~~ must serve as, an
590 interactive repository for governmental financial statements.
591 This system serves as the primary reporting location for
592 government financial information. A local government shall use
593 the system to file with the department copies of all audit
594 reports compiled pursuant to ss. 11.45 and 218.39. The system
595 must be accessible to the public and must be open to inspection
596 at all times by the Legislature, the Auditor General, and the
597 Chief Inspector General.

598 1. The Chief Financial Officer may consult with
599 stakeholders with regard to, ~~including the department, the~~
600 ~~Auditor General, a representative of a municipality or county, a~~
601 ~~representative of a special district, a municipal bond investor,~~
602 ~~and an information technology professional employed in the~~
603 ~~private sector, for input on the design and implementation of~~
604 the Florida Open Financial Statement System.

605 2. The Chief Financial Officer may choose contractors to
606 build one or more eXtensible Business Reporting Language (XBRL)
607 taxonomies suitable for state, county, municipal, and special
608 district financial filings and to create a software tool that
609 enables financial statement filers to easily create XBRL

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610 documents consistent with such taxonomies. The Chief Financial
611 Officer must recruit and select contractors through an open
612 request for proposals process pursuant to chapter 287.

613 3. The Chief Financial Officer must require that all work
614 products be completed no later than December 31, 2021.

615 4. If the Chief Financial Officer deems the work products
616 adequate, all local governmental financial statements for fiscal
617 years ending on or after September 1, 2022, may ~~must~~ be filed in
618 XBRL format as prescribed by the Chief Financial Officer ~~and~~
619 ~~must meet the validation requirements of the relevant taxonomy.~~

620 5. A local government that begins filing in XBRL format may
621 not be required to make filings in Portable Document Format.

622 (i) Each local governmental entity that enters all required
623 information in the Florida Open Financial Statement System is
624 deemed to be compliant with this section, except as otherwise
625 provided in this section.

626 Section 11. Section 395.1061, Florida Statutes, is created
627 to read:

628 395.1061 Professional liability coverage.-

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

630 (a) "Committee" means a committee or board of a hospital
631 established to make recommendations, policies, or decisions
632 regarding patient institutional utilization, patient treatment,
633 or institutional staff privileges or to perform other
634 administrative or professional purposes or functions.

635 (b) "Covered individuals" means the officers; trustees;
636 volunteer workers; trainees; committee members, including
637 physicians, osteopathic physicians, podiatric physicians, and
638 dentists; and employees of the hospital other than employed

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639 physicians licensed under chapter 458, physician assistants
640 licensed under chapter 458, osteopathic physicians licensed
641 under chapter 459, dentists licensed under chapter 466, and
642 podiatric physicians licensed under chapter 461. However, with
643 respect to a hospital, the term also includes house physicians,
644 interns, employed physician residents in a resident training
645 program, and physicians performing purely administrative duties
646 for the hospital instead of treating patients. The coverage
647 applies to the hospital and those included in the definition of
648 health care provider as provided in s. 985.6441(1).

649 (c) "Hospital system" means two or more hospitals
650 associated by common ownership or corporate affiliation.

651 (d) "House physician" means any physician, osteopathic
652 physician, podiatric physician, or dentist at a hospital,
653 except:

654 1. The physician, osteopathic physician, podiatric
655 physician, or dentist who has staff privileges at a hospital,
656 provides emergency room services, or performs a medical or
657 dental service for a fee; or

658 2. An anesthesiologist, a pathologist, or a radiologist.

659 (e) "Occurrence" means an accident or incident, including
660 continuous or repeated exposure to certain harmful conditions,
661 which results in patient injuries.

662 (f) "Per claim" means all claims per patient arising out of
663 an occurrence.

664 (2) Each hospital, unless exempted under paragraph (3)(b),
665 must demonstrate financial responsibility for maintaining
666 professional liability coverage to pay claims and costs
667 ancillary thereto arising out of the rendering of or failure to

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668 render medical care or services and for bodily injury or
669 property damage to the person or property of any patient arising
670 out of the activities of the hospital or arising out of the
671 activities of covered individuals, to the satisfaction of the
672 agency, by meeting one of the following requirements:

673 (a) Establish an escrow account in an amount equivalent to
674 \$10,000 per claim for each bed in such hospital, not to exceed a
675 \$2.5 million annual aggregate.

676 (b) Obtain professional liability coverage in an amount
677 equivalent to \$10,000 or more per claim for each bed in such
678 hospital from a private insurer, from the Joint Underwriting
679 Association established under s. 627.351(4), or through a plan
680 of self-insurance as provided in s. 627.357. However, a hospital
681 may not be required to obtain such coverage in an amount
682 exceeding a \$2.5 million annual aggregate.

683 (3) (a) Each hospital, unless exempted under paragraph (b),
684 shall provide evidence of compliance and remain in continuous
685 compliance with the professional liability coverage provisions
686 of this section. The agency may not issue or renew the license
687 of any hospital that does not provide evidence of compliance or
688 that provides evidence of insufficient coverage.

689 (b) Any hospital operated by an agency, subdivision, or
690 instrumentality of the state is exempt from the provisions of
691 this section.

692 (4) A hospital system may meet the professional liability
693 coverage requirement with an escrow account, insurance, or self-
694 insurance policies if the \$10,000 per claim and \$2.5 million
695 annual aggregate are met for each hospital in the hospital
696 system.

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697 Section 12. Section 414.40, Florida Statutes, is amended to
698 read:

699 414.40 Stop Inmate Fraud Program established; guidelines.-

700 (1) There is created within the Department of Economic
701 Opportunity ~~Financial Services~~ a Stop Inmate Fraud Program.

702 (2) The Department of Economic Opportunity ~~Financial~~
703 ~~Services~~ is directed to implement the Stop Inmate Fraud Program
704 in accordance with the following guidelines:

705 (a) The program shall establish procedures for sharing
706 public records not exempt from the public records law among
707 social services agencies regarding the identities of persons
708 incarcerated in state correctional institutions, as defined in
709 s. 944.02, and ~~or~~ in county, municipal, or regional jails or
710 other detention facilities of local governments under chapter
711 950 and ~~or~~ chapter 951 who are wrongfully receiving public
712 assistance benefits or entitlement benefits.

713 (b) Pursuant to these procedures, the program shall have
714 access to records containing correctional information not exempt
715 from the public records law on incarcerated persons which have
716 been generated as criminal justice information. As used in this
717 paragraph, the terms "record" and "criminal justice information"
718 have the same meanings as provided in s. 943.045.

719 (c) Database searches shall be conducted of the inmate
720 population at each correctional institution or other detention
721 facility. A correctional institution or a detention facility
722 shall provide the Stop Inmate Fraud Program with the information
723 necessary to identify persons wrongfully receiving benefits in
724 the medium requested by the Stop Inmate Fraud Program if the
725 correctional institution or detention facility maintains the

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726 information in that medium.

727 (d) Data obtained from correctional institutions or other
728 detention facilities shall be compared with the client files of
729 the Department of Children and Families, the Department of
730 Economic Opportunity, and other state or local agencies as
731 needed to identify persons wrongfully obtaining benefits. Data
732 comparisons shall be accomplished during periods of low
733 information demand by agency personnel to minimize inconvenience
734 to the agency.

735 (e) Results of data comparisons shall be furnished to the
736 appropriate office for use in the county in which the data
737 originated. The program may provide reports of the data it
738 obtains to appropriate state, federal, and local government
739 agencies or governmental entities, including, but not limited
740 to:

741 1. The Child Support Enforcement Program of the Department
742 of Revenue, so that the data may be used as locator information
743 on persons being sought for purposes of child support.

744 2. The Social Security Administration, so that the data may
745 be used to reduce federal entitlement fraud within the state.

746 3. The Division of Public Assistance Fraud of the
747 Department of Financial Services, so that an investigation of
748 the fraudulent receipt of public assistance may be facilitated.

749 (f) Reports by the program to another agency or entity
750 shall be generated bimonthly, or as otherwise directed, and
751 shall be designed to accommodate that agency's or entity's
752 particular needs for data.

753 (g) Only those persons with active cases, or with cases
754 that were active during the incarceration period, shall be

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755 reported, in order that the funding agency or entity, upon
756 verification of the data, may take whatever action is deemed
757 appropriate.

758 (h) For purposes of program review and analysis, each
759 agency or entity receiving data from the program shall submit
760 reports to the program which indicate the results of how the
761 data was used.

762 Section 13. Paragraph (a) of subsection (16) of section
763 440.02, Florida Statutes, is amended to read:

764 440.02 Definitions.—When used in this chapter, unless the
765 context clearly requires otherwise, the following terms shall
766 have the following meanings:

767 (16) (a) "Employer" means the state and all political
768 subdivisions thereof, all public and quasi-public corporations
769 therein, every person carrying on any employment, and the legal
770 representative of a deceased person or the receiver or trustees
771 of any person. The term "Employer" also includes employment
772 agencies and, employee leasing companies that, and similar
773 agents who provide employees to other business entities or
774 persons. If the employer is a corporation, parties in actual
775 control of the corporation, including, but not limited to, the
776 president, officers who exercise broad corporate powers,
777 directors, and all shareholders who directly or indirectly own a
778 controlling interest in the corporation, are considered the
779 employer for the purposes of ss. 440.105, 440.106, and 440.107.

780 Section 14. Effective January 1, 2023, subsections (3),
781 (4), (10), and (12) of section 440.05, Florida Statutes, are
782 amended to read:

783 440.05 Election of exemption; revocation of election;

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784 notice; certification.—

785 (3) The notice of election to be exempt must be
786 electronically submitted to the department by the officer of a
787 corporation who is allowed to claim an exemption as provided by
788 this chapter and must list the name, date of birth, valid driver
789 license number or Florida identification card number, and all
790 certified or registered licenses issued pursuant to chapter 489
791 held by the person seeking the exemption, the registration
792 number of the corporation filed with the Division of
793 Corporations of the Department of State, and the percentage of
794 ownership evidencing the required ownership under this chapter.
795 The notice of election to be exempt must identify each
796 corporation that employs the person electing the exemption and
797 must list the ~~social security number or~~ federal tax
798 identification number of each such employer and the additional
799 documentation required by this section. In addition, the notice
800 of election to be exempt must provide that the officer electing
801 an exemption is not entitled to benefits under this chapter,
802 must provide that the election does not exceed exemption limits
803 for officers provided in s. 440.02, ~~and~~ must certify that any
804 employees of the corporation whose officer elects an exemption
805 are covered by workers' compensation insurance, and must certify
806 that the officer electing an exemption has completed an online
807 workers' compensation coverage and compliance tutorial developed
808 by the department. Upon receipt of the notice of the election to
809 be exempt, receipt of all application fees, and a determination
810 by the department that the notice meets the requirements of this
811 subsection, the department shall issue a certification of the
812 election to the officer, unless the department determines that

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813 the information contained in the notice is invalid. The
814 department shall revoke a certificate of election to be exempt
815 from coverage upon a determination by the department that the
816 person does not meet the requirements for exemption or that the
817 information contained in the notice of election to be exempt is
818 invalid. The certificate of election must list the name of the
819 corporation listed in the request for exemption. A new
820 certificate of election must be obtained each time the person is
821 employed by a new or different corporation that is not listed on
822 the certificate of election. Upon written request from a
823 workers' compensation carrier, the department shall send
824 thereafter an electronic notification to the carrier identifying
825 each of its policyholders for which a notice of election to be
826 exempt has been issued or for which a notice of revocation to be
827 exempt has been received ~~A notice of the certificate of election~~
828 ~~must be sent to each workers' compensation carrier identified in~~
829 ~~the request for exemption.~~ Upon filing a notice of revocation of
830 election, an officer who is a subcontractor or an officer of a
831 corporate subcontractor must notify her or his contractor. ~~Upon~~
832 ~~revocation of a certificate of election of exemption by the~~
833 ~~department, the department shall notify the workers'~~
834 ~~compensation carriers identified in the request for exemption.~~

835 (4) The notice of election to be exempt from the provisions
836 of this chapter must contain a notice that clearly states in
837 substance the following: "Any person who, knowingly and with
838 intent to injure, defraud, or deceive the department or any
839 employer or employee, insurance company, or any other person,
840 files a notice of election to be exempt containing any false or
841 misleading information is guilty of a felony of the third

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842 degree." Each person filing a notice of election to be exempt
843 shall personally sign the notice and attest that he or she has
844 reviewed, understands, and acknowledges the foregoing notice.
845 The certificate of election to be exempt must contain the
846 following notice: "This certificate of election to be exempt is
847 NOT a license issued by the Department of Business and
848 Professional Regulation (DBPR). To determine if the
849 certificateholder is required to have a license to perform work
850 or to verify the license of the certificateholder, go to (insert
851 DBPR's website address for where to find this information)."

852 ~~(10) Each officer of a corporation who is actively engaged~~
853 ~~in the construction industry and who elects an exemption from~~
854 ~~this chapter shall maintain business records as specified by the~~
855 ~~department by rule.~~

856 (11)~~(12)~~ Certificates of election to be exempt issued under
857 subsection (3) ~~shall~~ apply only to the corporate officer named
858 on the notice of election to be exempt ~~and apply only within the~~
859 ~~scope of the business or trade listed on the notice of election~~
860 ~~to be exempt.~~

861 Section 15. Effective January 1, 2023, paragraphs (a) and
862 (d) of subsection (7) of section 440.107, Florida Statutes, are
863 amended to read:

864 440.107 Department powers to enforce employer compliance
865 with coverage requirements.—

866 (7) (a) Whenever the department determines that an employer
867 who is required to secure the payment to his or her employees of
868 the compensation provided for by this chapter has failed to
869 secure the payment of workers' compensation required by this
870 chapter or to produce the required business records under

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871 subsection (5) within 21 ~~10-business~~ days after receipt of the
872 written request of the department, such failure shall be deemed
873 an immediate serious danger to public health, safety, or welfare
874 sufficient to justify service by the department of a stop-work
875 order on the employer, requiring the cessation of all business
876 operations. If the department makes such a determination, the
877 department shall issue a stop-work order within 72 hours. The
878 order shall take effect when served upon the employer or, for a
879 particular employer worksite, when served at that worksite. In
880 addition to serving a stop-work order at a particular worksite
881 which shall be effective immediately, the department shall
882 immediately proceed with service upon the employer which shall
883 be effective upon all employer worksites in the state for which
884 the employer is not in compliance. A stop-work order may be
885 served with regard to an employer's worksite by posting a copy
886 of the stop-work order in a conspicuous location at the
887 worksite. Information related to an employer's stop-work order
888 shall be made available on the division's website, ~~be updated~~
889 ~~daily~~, and remain on the website for at least 5 years. The order
890 shall remain in effect until the department issues an order
891 releasing the stop-work order upon a finding that the employer
892 has come into compliance with the coverage requirements of this
893 chapter and has paid any penalty assessed under this section.
894 The department may issue an order of conditional release from a
895 stop-work order to an employer upon a finding that the employer
896 has complied with the coverage requirements of this chapter,
897 paid a penalty of \$1,000 as a down payment, and agreed to remit
898 periodic payments of the remaining penalty amount pursuant to a
899 payment agreement schedule with the department or pay the

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900 remaining penalty amount in full. An employer may not enter into
901 a payment agreement schedule unless the employer has fully paid
902 any previous penalty assessed under this section. If an order of
903 conditional release is issued, failure by the employer to pay
904 the penalty in full or enter into a payment agreement with the
905 department within 21 ~~28~~ days after service of the first penalty
906 assessment calculation ~~stop-work order~~ upon the employer, or to
907 meet any term or condition of such penalty payment agreement,
908 shall result in the immediate reinstatement of the stop-work
909 order and the entire unpaid balance of the penalty shall become
910 immediately due.

911 (d)1. In addition to any penalty, stop-work order, or
912 injunction, the department shall assess against an ~~any~~ employer
913 who has failed to secure the payment of compensation as required
914 by this chapter a penalty equal to 2 times the amount the
915 employer would have paid in premium when applying approved
916 manual rates to the employer's payroll during periods for which
917 it failed to secure the payment of workers' compensation
918 required by this chapter within the preceding 12-month ~~2-year~~
919 period or \$1,000, whichever is greater. However, for an employer
920 who is issued a stop-work order for materially understating or
921 concealing payroll or has been previously issued a stop-work
922 order or an order of penalty assessment, the preceding 24-month
923 period shall be used to calculate the penalty as specified in
924 this subparagraph.

925 a. For an employer ~~employers~~ who has ~~have~~ not been
926 previously issued a stop-work order or order of penalty
927 assessment, the department must allow the employer to receive a
928 credit for the initial payment of the estimated annual workers'

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929 compensation policy premium, as determined by the carrier, to be
930 applied to the penalty. Before applying the credit to the
931 penalty, the employer must provide the department with
932 documentation reflecting that the employer has secured the
933 payment of compensation pursuant to s. 440.38 and proof of
934 payment to the carrier. In order for the department to apply a
935 credit for an employer that has secured workers' compensation
936 for leased employees by entering into an employee leasing
937 contract with a licensed employee leasing company, the employer
938 must provide the department with a written confirmation, by a
939 representative from the employee leasing company, of the dollar
940 or percentage amount attributable to the initial estimated
941 workers' compensation expense for leased employees, and proof of
942 payment to the employee leasing company. The credit may not be
943 applied unless the employer provides the documentation and proof
944 of payment to the department within 21 ~~28~~ days after the
945 employer's receipt of the written request to produce business
946 records for calculating the penalty under this subparagraph
947 ~~service of the stop-work order or first order of penalty~~
948 ~~assessment upon the employer.~~

949 b. For an employer ~~employers~~ who has ~~have~~ not been
950 previously issued a stop-work order or order of penalty
951 assessment, the department must reduce the final assessed
952 penalty by 25 percent if the employer has complied with
953 administrative rules adopted pursuant to subsection (5) and has
954 provided such business records to the department within 21 ~~10~~
955 ~~business~~ days after the employer's receipt of the written
956 request to produce business records for calculating the penalty
957 under this subparagraph.

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958 c. For an employer who has not been previously issued a
959 stop-work order or an order of penalty assessment, the
960 department must reduce the final assessed penalty by 15 percent
961 if the employer correctly answers at least 80 percent of the
962 questions from an online workers' compensation coverage and
963 compliance tutorial, developed by the department, within 21 days
964 after the employer's receipt of the written request to produce
965 business records for calculating the penalty under this
966 subparagraph. The online tutorial must be taken in a department
967 office location identified by rule.

968
969 The \$1,000 penalty shall be assessed against the employer even
970 if the calculated penalty after the credit provided in sub-
971 subparagraph a., the ~~and~~ 25 percent reduction provided in sub-
972 subparagraph b., and the 15 percent reduction provided in sub-
973 subparagraph c., as applicable, have been applied is less than
974 \$1,000.

975 2. Any subsequent violation within 5 years after the most
976 recent violation shall, in addition to the penalties set forth
977 in this subsection, be deemed a knowing act within the meaning
978 of s. 440.105.

979 Section 16. Subsection (12) of section 440.13, Florida
980 Statutes, is amended to read:

981 440.13 Medical services and supplies; penalty for
982 violations; limitations.—

983 (12) CREATION OF THREE-MEMBER PANEL; GUIDES OF MAXIMUM
984 REIMBURSEMENT ALLOWANCES.—

985 (a) A three-member panel is created, consisting of the
986 Chief Financial Officer, or the Chief Financial Officer's

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987 designee, and two members to be appointed by the Governor,
988 subject to confirmation by the Senate, one member who, on
989 account of present or previous vocation, employment, or
990 affiliation, shall be classified as a representative of
991 employers, the other member who, on account of previous
992 vocation, employment, or affiliation, shall be classified as a
993 representative of employees. The panel shall determine statewide
994 schedules of maximum reimbursement allowances for medically
995 necessary treatment, care, and attendance provided by
996 physicians, hospitals, ambulatory surgical centers, work-
997 hardening programs, pain programs, and durable medical
998 equipment. The maximum reimbursement allowances for inpatient
999 hospital care shall be based on a schedule of per diem rates, to
1000 be approved by the three-member panel no later than March 1,
1001 1994, to be used in conjunction with a precertification manual
1002 as determined by the department, including maximum hours in
1003 which an outpatient may remain in observation status, which
1004 shall not exceed 23 hours. All compensable charges for hospital
1005 outpatient care shall be reimbursed at 75 percent of usual and
1006 customary charges, except as otherwise provided by this
1007 subsection. Annually, the three-member panel shall adopt
1008 schedules of maximum reimbursement allowances for physicians,
1009 hospital inpatient care, hospital outpatient care, ambulatory
1010 surgical centers, work-hardening programs, and pain programs. An
1011 individual physician, hospital, ambulatory surgical center, pain
1012 program, or work-hardening program shall be reimbursed:

- 1013 1. either The agreed-upon contract price; or
- 1014 2. If there is no agreed-upon contract price, the lesser of
- 1015 the provider's billed charge or the maximum reimbursement

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1016 allowance in the appropriate schedule.

1017 (b) It is the intent of the Legislature to increase the
1018 schedule of maximum reimbursement allowances for selected
1019 physicians effective January 1, 2004, and to pay for the
1020 increases through reductions in payments to hospitals. Revisions
1021 developed pursuant to this subsection are limited to the
1022 following:

1023 1. Payments for outpatient physical, occupational, and
1024 speech therapy provided by hospitals shall be reduced to the
1025 schedule of maximum reimbursement allowances for these services
1026 which applies to nonhospital providers.

1027 2. Payments for scheduled outpatient nonemergency
1028 radiological and clinical laboratory services that are not
1029 provided in conjunction with a surgical procedure shall be
1030 reduced to the schedule of maximum reimbursement allowances for
1031 these services which applies to nonhospital providers.

1032 3. Outpatient reimbursement for scheduled surgeries shall
1033 be reduced from 75 percent of charges to 60 percent of charges.

1034 4. Maximum reimbursement for a physician licensed under
1035 chapter 458 or chapter 459 shall be increased to 110 percent of
1036 the reimbursement allowed by Medicare, using appropriate codes
1037 and modifiers or the medical reimbursement level adopted by the
1038 three-member panel as of January 1, 2003, whichever is greater.

1039 5. Maximum reimbursement for surgical procedures shall be
1040 increased to 140 percent of the reimbursement allowed by
1041 Medicare or the medical reimbursement level adopted by the
1042 three-member panel as of January 1, 2003, whichever is greater.

1043 (c) As to reimbursement for a prescription medication, the
1044 reimbursement amount for a prescription shall be the average

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1045 wholesale price plus \$4.18 for the dispensing fee. For
1046 repackaged or relabeled prescription medications dispensed by a
1047 dispensing practitioner as provided in s. 465.0276, the fee
1048 schedule for reimbursement shall be 112.5 percent of the average
1049 wholesale price, plus \$8.00 for the dispensing fee. For purposes
1050 of this subsection, the average wholesale price shall be
1051 calculated by multiplying the number of units dispensed times
1052 the per-unit average wholesale price set by the original
1053 manufacturer of the underlying drug dispensed by the
1054 practitioner, based upon the published manufacturer's average
1055 wholesale price published in the Medi-Span Master Drug Database
1056 as of the date of dispensing. All pharmaceutical claims
1057 submitted for repackaged or relabeled prescription medications
1058 must include the National Drug Code of the original
1059 manufacturer. Fees for pharmaceuticals and pharmaceutical
1060 services shall be reimbursable at the applicable fee schedule
1061 amount except where the employer or carrier, or a service
1062 company, third party administrator, or any entity acting on
1063 behalf of the employer or carrier directly contracts with the
1064 provider seeking reimbursement for a lower amount.

1065 (d) Reimbursement for all fees and other charges for such
1066 treatment, care, and attendance, including treatment, care, and
1067 attendance provided by any hospital or other health care
1068 provider, ambulatory surgical center, work-hardening program, or
1069 pain program, must not exceed the amounts provided by the
1070 uniform schedule of maximum reimbursement allowances as
1071 determined by the panel or as otherwise provided in this
1072 section. This subsection also applies to independent medical
1073 examinations performed by health care providers under this

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1074 chapter. In determining the uniform schedule, the panel shall
1075 first approve the data which it finds representative of
1076 prevailing charges in the state for similar treatment, care, and
1077 attendance of injured persons. Each health care provider, health
1078 care facility, ambulatory surgical center, work-hardening
1079 program, or pain program receiving workers' compensation
1080 payments shall maintain records verifying their usual charges.
1081 In establishing the uniform schedule of maximum reimbursement
1082 allowances, the panel must consider:

1083 1. The levels of reimbursement for similar treatment, care,
1084 and attendance made by other health care programs or third-party
1085 providers;

1086 2. The impact upon cost to employers for providing a level
1087 of reimbursement for treatment, care, and attendance which will
1088 ensure the availability of treatment, care, and attendance
1089 required by injured workers;

1090 3. The financial impact of the reimbursement allowances
1091 upon health care providers and health care facilities, including
1092 trauma centers as defined in s. 395.4001, and its effect upon
1093 their ability to make available to injured workers such
1094 medically necessary remedial treatment, care, and attendance.
1095 The uniform schedule of maximum reimbursement allowances must be
1096 reasonable, must promote health care cost containment and
1097 efficiency with respect to the workers' compensation health care
1098 delivery system, and must be sufficient to ensure availability
1099 of such medically necessary remedial treatment, care, and
1100 attendance to injured workers; and

1101 4. The most recent average maximum allowable rate of
1102 increase for hospitals determined by the Health Care Board under

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1103 chapter 408.

1104 (e) In addition to establishing the uniform schedule of
1105 maximum reimbursement allowances, the panel shall:

1106 1. Take testimony, receive records, and collect data to
1107 evaluate the adequacy of the workers' compensation fee schedule,
1108 nationally recognized fee schedules and alternative methods of
1109 reimbursement to health care providers and health care
1110 facilities for inpatient and outpatient treatment and care.

1111 2. Survey health care providers and health care facilities
1112 to determine the availability and accessibility of workers'
1113 compensation health care delivery systems for injured workers.

1114 3. Survey carriers to determine the estimated impact on
1115 carrier costs and workers' compensation premium rates by
1116 implementing changes to the carrier reimbursement schedule or
1117 implementing alternative reimbursement methods.

1118 4. Submit recommendations on or before January 15, 2017,
1119 and biennially thereafter, to the President of the Senate and
1120 the Speaker of the House of Representatives on methods to
1121 improve the workers' compensation health care delivery system.

1122
1123 The department, as requested, shall provide data to the panel,
1124 including, but not limited to, utilization trends in the
1125 workers' compensation health care delivery system. The
1126 department shall provide the panel with an annual report
1127 regarding the resolution of medical reimbursement disputes and
1128 any actions pursuant to subsection (8). The department shall
1129 provide administrative support and service to the panel to the
1130 extent requested by the panel and may adopt rules necessary to
1131 administer this subsection. For prescription medication

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1132 purchased under the requirements of this subsection, a
1133 dispensing practitioner shall not possess such medication unless
1134 payment has been made by the practitioner, the practitioner's
1135 professional practice, or the practitioner's practice management
1136 company or employer to the supplying manufacturer, wholesaler,
1137 distributor, or drug repackager within 60 days of the dispensing
1138 practitioner taking possession of that medication.

1139 Section 17. Subsection (3) of section 440.185, Florida
1140 Statutes, is amended to read:

1141 440.185 Notice of injury or death; reports; penalties for
1142 violations.-

1143 (3) Within 3 business days after the employer or the
1144 employee informs the carrier of an injury, the carrier shall
1145 send by regular mail or e-mail to the injured worker an
1146 informational brochure approved by the department which sets
1147 forth in clear and understandable language an explanation of the
1148 rights, benefits, procedures for obtaining benefits and
1149 assistance, criminal penalties, and obligations of injured
1150 workers and their employers under the Florida Workers'
1151 Compensation Law. Annually, the carrier or its third-party
1152 administrator shall send by regular mail or e-mail to the
1153 employer an informational brochure approved by the department
1154 which sets forth in clear and understandable language an
1155 explanation of the rights, benefits, procedures for obtaining
1156 benefits and assistance, criminal penalties, and obligations of
1157 injured workers and their employers under the Florida Workers'
1158 Compensation Law. All such informational brochures shall contain
1159 a notice that clearly states in substance the following: "Any
1160 person who, knowingly and with intent to injure, defraud, or

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1161 deceive any employer or employee, insurance company, or self-
1162 insured program, files a statement of claim containing any false
1163 or misleading information commits a felony of the third degree.”

1164 Section 18. Subsection (3) of section 440.381, Florida
1165 Statutes, is amended to read:

1166 440.381 Application for coverage; reporting payroll;
1167 payroll audit procedures; penalties.—

1168 (3) The Financial Services Commission, in consultation with
1169 the department, shall establish by rule minimum requirements for
1170 audits of payroll and classifications ~~in order~~ to ensure that
1171 the appropriate premium is charged for workers' compensation
1172 coverage. The rules must ~~shall~~ ensure that audits performed by
1173 both carriers and employers are adequate to provide that all
1174 sources of payments to employees, subcontractors, and
1175 independent contractors are ~~have been~~ reviewed and that the
1176 accuracy of classification of employees is ~~has been~~ verified.
1177 The rules must require ~~shall provide~~ that employers in all
1178 classes other than the construction class be audited at least
1179 ~~not less frequently than~~ biennially and may provide for more
1180 frequent audits of employers in specified classifications based
1181 on factors such as amount of premium, type of business, loss
1182 ratios, or other relevant factors. ~~In no event shall~~ Employers
1183 in the construction class ~~generating more than the amount of~~
1184 premium required to be experience rated must ~~be~~ audited at
1185 least ~~less than~~ annually. The annual audits required for
1186 construction classes must ~~shall~~ consist of physical onsite
1187 audits for policies only if the estimated annual premium is
1188 \$10,000 or more. Payroll verification audit rules must include,
1189 but need not be limited to, the use of state and federal reports

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1190 of employee income, payroll and other accounting records,
1191 certificates of insurance maintained by subcontractors, and
1192 duties of employees. At the completion of an audit, the employer
1193 or officer of the corporation and the auditor must print and
1194 sign their names on the audit document and attach proof of
1195 identification to the audit document.

1196 Section 19. Subsection (2) of section 497.277, Florida
1197 Statutes, is amended to read:

1198 497.277 Other charges.—Other than the fees for the sale of
1199 burial rights, burial merchandise, and burial services, no other
1200 fee may be directly or indirectly charged, contracted for, or
1201 received by a cemetery company as a condition for a customer to
1202 use any burial right, burial merchandise, or burial service,
1203 except for:

1204 (2) Charges paid for transferring burial rights from one
1205 purchaser to another; ~~however, no such fee may exceed \$50.~~

1206 Section 20. Paragraph (b) of subsection (1) of section
1207 497.369, Florida Statutes, is amended to read:

1208 497.369 Embalmers; licensure as an embalmer by endorsement;
1209 licensure of a temporary embalmer.—

1210 (1) The licensing authority shall issue a license by
1211 endorsement to practice embalming to an applicant who has
1212 remitted an examination fee set by rule of the licensing
1213 authority not to exceed \$200 and who the licensing authority
1214 certifies:

1215 (b)1. Holds a valid license in good standing to practice
1216 embalming in another state of the United States and has engaged
1217 in the full-time, licensed practice of embalming in that state
1218 for at least 5 years, ~~provided that, when the applicant secured~~

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1219 ~~her or his original license, the requirements for licensure were~~
1220 ~~substantially equivalent to or more stringent than those~~
1221 ~~existing in this state; or~~

1222 2. Meets the qualifications for licensure in s. 497.368,
1223 except that the internship requirement shall be deemed to have
1224 been satisfied by 1 year's practice as a licensed embalmer in
1225 another state, and has, within 10 years before ~~prior to~~ the date
1226 of application, successfully completed a state, regional, or
1227 national examination in mortuary science, which, as determined
1228 by rule of the licensing authority, is substantially equivalent
1229 to or more stringent than the examination given by the licensing
1230 authority.

1231 Section 21. Paragraphs (b) and (f) of subsection (1) of
1232 section 497.372, Florida Statutes, are amended to read:

1233 497.372 Funeral directing; conduct constituting practice of
1234 funeral directing.—

1235 (1) The practice of funeral directing shall be construed to
1236 consist of the following functions, which may be performed only
1237 by a licensed funeral director:

1238 (b) Planning or arranging, on an at-need basis, the details
1239 of funeral services, embalming, cremation, or other services
1240 relating to the final disposition of human remains, and
1241 ~~including the removal of such remains from the state; setting~~
1242 ~~the time of the services;~~ establishing the type of services to
1243 be rendered; ~~acquiring the services of the clergy; and obtaining~~
1244 ~~vital information for the filing of death certificates and~~
1245 ~~obtaining of burial transit permits.~~

1246 (f) Directing, being in charge or apparent charge of, or
1247 supervising, directly or indirectly, any memorial service ~~held~~

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1248 ~~prior to or within 72 hours of the burial or cremation,~~ if such
1249 memorial service is sold or arranged by a licensee.

1250 Section 22. Paragraph (b) of subsection (1) of section
1251 497.374, Florida Statutes, is amended to read:

1252 497.374 Funeral directing; licensure as a funeral director
1253 by endorsement; licensure of a temporary funeral director.—

1254 (1) The licensing authority shall issue a license by
1255 endorsement to practice funeral directing to an applicant who
1256 has remitted a fee set by rule of the licensing authority not to
1257 exceed \$200 and who:

1258 (b)1. Holds a valid license in good standing to practice
1259 funeral directing in another state of the United States and has
1260 engaged in the full-time, licensed practice of funeral directing
1261 in that state for at least 5 years, ~~provided that, when the~~
1262 ~~applicant secured her or his original license, the requirements~~
1263 ~~for licensure were substantially equivalent to or more stringent~~
1264 ~~than those existing in this state; or~~

1265 2. Meets the qualifications for licensure in s. 497.373,
1266 except that the applicant need not hold an associate degree or
1267 higher if the applicant holds a diploma or certificate from an
1268 accredited program of mortuary science, and has successfully
1269 completed a state, regional, or national examination in mortuary
1270 science or funeral service arts, which, as determined by rule of
1271 the licensing authority, is substantially equivalent to or more
1272 stringent than the examination given by the licensing authority.

1273 Section 23. Present subsection (6) of section 554.108,
1274 Florida Statutes, is redesignated as subsection (7), a new
1275 subsection (6) is added to that section, and subsection (1) of
1276 that section is amended, to read:

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1277 554.108 Inspection.—

1278 (1) The inspection requirements of this chapter apply only
1279 to boilers located in public assembly locations. A ~~potable hot~~
1280 ~~water supply~~ boiler with an a heat input of 200,000 British
1281 thermal units (Btu) per hour and above, up to an a heat input
1282 not exceeding 400,000 Btu per hour, is exempt from inspection;
1283 however, such an exempt boiler, if manufactured after July 1,
1284 2022, but must be stamped with the A.S.M.E. code symbol.
1285 Additionally, "HLW" and the boiler's A.S.M.E data report of a
1286 boiler with an input of 200,000 to 400,000 Btu per hour must be
1287 filed as required under s. 554.103(2).

1288 (6) Each enclosed space or room containing a boiler
1289 regulated under this chapter which is fired by the direct
1290 application of energy from the combustion of fuels and which is
1291 located in any portion of a public lodging establishment under
1292 s. 509.242 shall be equipped with one or more carbon monoxide
1293 detector devices.

1294 Section 24. Paragraphs (a) and (e) of subsection (1) and
1295 paragraph (a) of subsection (2) of section 554.111, Florida
1296 Statutes, are amended to read:

1297 554.111 Fees.—

1298 (1) The department shall charge the following fees:

1299 (a) For an applicant for a certificate of competency, the
1300 initial application fee shall be \$50, and the annual renewal fee
1301 shall be \$30. ~~The fee for examination shall be \$50.~~

1302 (e) An application for a boiler permit must include the
1303 manufacturer's data report ~~applicable certificate inspection fee~~
1304 ~~provided in paragraph (b).~~

1305 (2) Not more than an amount equal to one certificate

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1306 inspection fee may be charged or collected for any and all
1307 boiler inspections in any inspection period, except as otherwise
1308 provided in this chapter.

1309 (a) When it is necessary to make a special trip for testing
1310 and verification inspections ~~to observe the application of a~~
1311 ~~hydrostatic test~~, an additional fee equal to the fee for a
1312 certificate inspection of the boiler must be charged.

1313 Section 25. Subsection (4) of section 554.114, Florida
1314 Statutes, is amended to read:

1315 554.114 Prohibitions; penalties.—

1316 (4) A boiler insurance company, authorized inspection
1317 agency, or other person in violation of this section for more
1318 than 30 days shall pay a fine of \$10 per day for the subsequent
1319 ~~first~~ 10 days of noncompliance, \$50 per day for the subsequent
1320 20 days of noncompliance, and \$100 per day for each subsequent
1321 day ~~over 20 days~~ of noncompliance thereafter.

1322 Section 26. Subsection (9) of section 624.307, Florida
1323 Statutes, is amended to read:

1324 624.307 General powers; duties.—

1325 (9) Upon receiving service of legal process issued in any
1326 civil action or proceeding in this state against any regulated
1327 person or any unauthorized insurer under s. 626.906 or s.
1328 626.937 that ~~which~~ is required to appoint the Chief Financial
1329 Officer as its agent ~~attorney~~ to receive service of all legal
1330 process, the Chief Financial Officer shall make the process
1331 available through a secure online portal, ~~as attorney, may, in~~
1332 ~~lieu of sending the process by registered or certified mail,~~
1333 ~~send the process or make it available by any other verifiable~~
1334 ~~means, including, but not limited to, making the documents~~

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1335 ~~available by electronic transmission from a secure website~~
1336 established by the department to the person last designated by
1337 the regulated person or the unauthorized insurer to receive the
1338 process. When process documents are made available
1339 electronically, the Chief Financial Officer shall promptly send
1340 a notice of receipt of service of process to the person last
1341 designated by the regulated person or unauthorized insurer to
1342 receive legal process. The notice must state the date ~~and manner~~
1343 ~~in which the copy of the process was made available to the~~
1344 regulated person or unauthorized insurer being served and
1345 contain the uniform resource locator (URL) where ~~for a hyperlink~~
1346 ~~to access files and information on the department's website to~~
1347 ~~obtain a copy of the process~~ may be obtained.

1348 Section 27. Section 624.422, Florida Statutes, is amended
1349 to read:

1350 624.422 Service of process; appointment of Chief Financial
1351 Officer as process agent.—

1352 (1) Each licensed insurer, whether domestic, foreign, or
1353 alien, shall be deemed to have appointed the Chief Financial
1354 Officer and her or his successors in office as its agent
1355 ~~attorney~~ to receive service of all legal process issued against
1356 it in any civil action or proceeding in this state; and process
1357 so served shall be valid and binding upon the insurer.

1358 (2) Before ~~Prior to~~ its authorization to transact insurance
1359 in this state, each insurer shall file with the department
1360 designation of the name and e-mail address of the person to whom
1361 process against it served upon the Chief Financial Officer is to
1362 be made available through the department's secure online portal
1363 ~~forwarded~~. Each insurer shall also file with the department

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1364 designation of the name and e-mail address of the person to whom
1365 the department shall forward civil remedy notices filed under s.
1366 624.155. The insurer may change a designation at any time by a
1367 new filing.

1368 (3) Service of process submitted through the department's
1369 secure online portal upon the Chief Financial Officer as the
1370 insurer's agent ~~attorney~~ pursuant to such an appointment shall
1371 be the sole method of service of process upon an authorized
1372 domestic, foreign, or alien insurer in this state.

1373 Section 28. Subsection (1) of section 624.423, Florida
1374 Statutes, is amended to read:

1375 624.423 Serving process.—

1376 (1) Service of process upon the Chief Financial Officer as
1377 process agent of the insurer under s. 624.422 and s. 626.937
1378 shall be made ~~by serving a copy of the process upon the Chief~~
1379 ~~Financial Officer or upon her or his assistant, deputy, or other~~
1380 ~~person in charge of her or his office. Service may also be made~~
1381 ~~by mail or electronically as provided in s. 48.151(3) s. 48.151.~~
1382 Upon receiving such service, the Chief Financial Officer shall
1383 retain a record of the process ~~copy~~ and promptly notify and make
1384 ~~forward one copy of the process~~ available through the
1385 department's secure online portal ~~by registered or certified~~
1386 ~~mail or by other verifiable means~~, as provided under s.
1387 624.307(9), to the person last designated by the insurer to
1388 receive the same, as provided under s. 624.422(2). For purposes
1389 of this section, records shall ~~may~~ be retained electronically ~~as~~
1390 ~~paper or electronic copies.~~

1391 Section 29. Paragraph (f) of subsection (3) and paragraph
1392 (d) of subsection (4) of section 624.610, Florida Statutes, are

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1393 amended to read:

1394 624.610 Reinsurance.—

1395 (3)

1396 (f) If the assuming insurer is not authorized or accredited
1397 to transact insurance or reinsurance in this state pursuant to
1398 paragraph (a) or paragraph (b), the credit permitted by
1399 paragraph (c) or paragraph (d) must not be allowed unless the
1400 assuming insurer agrees in the reinsurance agreements:

1401 1.a. That in the event of the failure of the assuming
1402 insurer to perform its obligations under the terms of the
1403 reinsurance agreement, the assuming insurer, at the request of
1404 the ceding insurer, shall submit to the jurisdiction of any
1405 court of competent jurisdiction in any state of the United
1406 States, will comply with all requirements necessary to give the
1407 court jurisdiction, and will abide by the final decision of the
1408 court or of any appellate court in the event of an appeal; and

1409 b. To designate the Chief Financial Officer, pursuant to s.
1410 48.151(3) ~~s. 48.151~~, as its true and lawful agent ~~attorney~~ upon
1411 whom may be served any lawful process in any action, suit, or
1412 proceeding instituted by or on behalf of the ceding company.

1413 2. This paragraph is not intended to conflict with or
1414 override the obligation of the parties to a reinsurance
1415 agreement to arbitrate their disputes, if this obligation is
1416 created in the agreement.

1417 (4) Credit must be allowed when the reinsurance is ceded to
1418 an assuming insurer meeting the requirements of this subsection.

1419 (d) The assuming insurer must, in a form specified by the
1420 commission:

1421 1. Agree to provide prompt written notice and explanation

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1422 to the office if the assuming insurer falls below the minimum
1423 requirements set forth in paragraph (b) or paragraph (c), or if
1424 any regulatory action is taken against it for serious
1425 noncompliance with applicable law of any jurisdiction.

1426 2. Consent in writing to the jurisdiction of the courts of
1427 this state and to the designation of the Chief Financial
1428 Officer, pursuant to s. 48.151(3) ~~s. 48.151~~, as its true and
1429 lawful agent ~~attorney~~ upon whom may be served any lawful process
1430 in any action, suit, or proceeding instituted by or on behalf of
1431 the ceding insurer. This subparagraph does not limit or alter in
1432 any way the capacity of parties to a reinsurance agreement to
1433 agree to an alternative dispute resolution mechanism, except to
1434 the extent that such agreement is unenforceable under applicable
1435 insolvency or delinquency laws.

1436 3. Consent in writing to pay all final judgments, wherever
1437 enforcement is sought, obtained by a ceding insurer or its legal
1438 successor which have been declared enforceable in the
1439 jurisdiction where the judgment was obtained.

1440 4. Confirm in writing that it will include in each
1441 reinsurance agreement a provision requiring the assuming insurer
1442 to provide security in an amount equal to 100 percent of the
1443 assuming insurer's liabilities attributable to reinsurance ceded
1444 pursuant to that agreement, if the assuming insurer resists
1445 enforcement of a final judgment that is enforceable under the
1446 law of the jurisdiction in which it was obtained or enforcement
1447 of a properly enforceable arbitration award, whether obtained by
1448 the ceding insurer or by its legal successor on behalf of its
1449 resolution estate.

1450 5. Confirm in writing that it is not presently

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1451 participating in any solvent scheme of arrangement which
1452 involves this state's ceding insurers, and agree to notify the
1453 ceding insurer and the office and to provide security in an
1454 amount equal to 100 percent of the assuming insurer's
1455 liabilities to the ceding insurer if the assuming insurer enters
1456 into such a solvent scheme of arrangement. Such security must be
1457 consistent with subsection (5) or as specified by commission
1458 rule.

1459 Section 30. Present subsections (12) through (21) of
1460 section 626.015, Florida Statutes, are redesignated as
1461 subsections (13) through (22), respectively, a new subsection
1462 (12) is added to that section, and present subsection (20) of
1463 that section is amended, to read:

1464 626.015 Definitions.—As used in this part:

1465 (12) "Licensing authority" means the respective
1466 jurisdiction of the department or the office, as provided by
1467 law.

1468 (21)~~(20)~~ "Unaffiliated insurance agent" means a licensed
1469 insurance agent, except a limited lines agent, who is self-
1470 appointed and who practices as an independent consultant in the
1471 business of analyzing or abstracting insurance policies,
1472 providing insurance advice or counseling, or making specific
1473 recommendations or comparisons of insurance products for a fee
1474 established in advance by written contract signed by the
1475 parties. An unaffiliated insurance agent may not be affiliated
1476 with an insurer, insurer-appointed insurance agent, or insurance
1477 agency contracted with or employing insurer-appointed insurance
1478 agents. A licensed adjuster who is also an unaffiliated
1479 insurance agent may obtain an adjuster appointment in order to

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1480 adjust claims while holding an unaffiliated appointment on the
1481 agent license.

1482 Section 31. Subsection (4) of section 626.171, Florida
1483 Statutes, is amended to read:

1484 626.171 Application for license as an agent, customer
1485 representative, adjuster, service representative, or reinsurance
1486 intermediary.—

1487 (4) An applicant for a license issued by the department
1488 under this chapter ~~as an agent, customer representative,~~
1489 ~~adjuster, service representative, or reinsurance intermediary~~
1490 must submit a set of the individual applicant's fingerprints,
1491 or, if the applicant is not an individual, a set of the
1492 fingerprints of the sole proprietor, majority owner, partners,
1493 officers, and directors, to the department and must pay the
1494 fingerprint processing fee set forth in s. 624.501. Fingerprints
1495 must be processed in accordance with s. 624.34 and used to
1496 investigate the applicant's qualifications pursuant to s.
1497 626.201. The fingerprints must be taken by a law enforcement
1498 agency, designated examination center, or other department-
1499 approved entity. The department shall require all designated
1500 examination centers to have fingerprinting equipment and to take
1501 fingerprints from any applicant or prospective applicant who
1502 pays the applicable fee. The department may not approve an
1503 application for licensure as an agent, customer service
1504 representative, adjuster, service representative, or reinsurance
1505 intermediary if fingerprints have not been submitted.

1506 Section 32. Paragraph (f) of subsection (2) of section
1507 626.172, Florida Statutes, is amended to read:

1508 626.172 Application for insurance agency license.—

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1509 (2) An application for an insurance agency license must be
1510 signed by an individual required to be listed in the application
1511 under paragraph (a). An insurance agency may permit a third
1512 party to complete, submit, and sign an application on the
1513 insurance agency's behalf; however, the insurance agency is
1514 responsible for ensuring that the information on the application
1515 is true and correct and is accountable for any misstatements or
1516 misrepresentations. The application for an insurance agency
1517 license must include:

1518 (f) The fingerprints submitted in accordance with s.
1519 626.171(4) of each of the following:

- 1520 1. A sole proprietor;
- 1521 2. Each individual required to be listed in the application
1522 under paragraph (a); and
- 1523 3. Each individual who directs or participates in the
1524 management or control of an incorporated agency whose shares are
1525 not traded on a securities exchange.

1526
1527 ~~Fingerprints must be taken by a law enforcement agency or other~~
1528 ~~entity approved by the department and must be accompanied by the~~
1529 ~~fingerprint processing fee specified in s. 624.501. Fingerprints~~
1530 ~~must be processed in accordance with s. 624.34. However,~~
1531 Fingerprints need not be filed for an individual who is
1532 currently licensed and appointed under this chapter. This
1533 paragraph does not apply to corporations whose voting shares are
1534 traded on a securities exchange.

1535 Section 33. Section 626.173, Florida Statutes, is created
1536 to read:

1537 626.173 Insurance agency closure; cancellation of

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1538 licenses.—

1539 (1) If a licensed insurance agency permanently ceases the
1540 transaction of insurance or ceases the transaction of insurance
1541 for more than 30 days, the agent in charge, the director of the
1542 agency, or other officer listed on the original application for
1543 licensure must, within 35 days after the agency first ceases the
1544 transaction of insurance, do all of the following:

1545 (a) Cancel the insurance agency's license by completing and
1546 submitting a form prescribed by the department to notify the
1547 department of the cancellation of the license.

1548 (b) Notify all insurers by which the agency or agent in
1549 charge is appointed of the agency's cessation of operations, the
1550 date on which operations ceased, the identity of any agency or
1551 agent to which the agency's current book of business has been
1552 transferred, and the method by which agency records may be
1553 obtained during the time periods specified in ss. 626.561 and
1554 626.748.

1555 (c) Notify all policyholders currently insured by a policy
1556 written, produced, or serviced by the agency of the agency's
1557 cessation of operations; the date on which operations ceased;
1558 and the identity of the agency or agent to which the agency's
1559 current book of business has been transferred or, if no transfer
1560 has occurred, a statement directing the policyholder to contact
1561 the insurance company for assistance in locating a licensed
1562 agent to service the policy.

1563 (d) Notify all premium finance companies through which
1564 active policies are financed of the agency's cessation of
1565 operations, the date on which operations ceased, and the
1566 identity of the agency or agent to which the agency's current

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1567 book of business has been transferred.

1568 (e) Ensure that all funds held in a fiduciary capacity are
1569 properly distributed to the rightful owners.

1570 (2) (a) The department may, in a proceeding initiated
1571 pursuant to chapter 120, impose an administrative fine against
1572 the agent in charge or director or officer of the agency found
1573 in the proceeding to have violated any provision of this
1574 section. A proceeding may not be initiated and a fine may not
1575 accrue until after the person has been notified in writing of
1576 the nature of the violation, has been afforded 10 business days
1577 to correct the violation, and has failed to do so.

1578 (b) A fine imposed under this subsection may not exceed the
1579 amounts specified in s. 626.681 per violation.

1580 (c) The department may, in addition to the imposition of an
1581 administrative fine under this subsection, suspend or revoke the
1582 license of a licensee fined under this subsection.

1583 (d) In imposing any administrative penalty or remedy
1584 provided under this subsection, the department shall take into
1585 account the appropriateness of the penalty with respect to the
1586 size of the financial resources and the good faith of the person
1587 charged, the gravity of the violation, the history of previous
1588 violations, and other matters as justice may require.

1589 Section 34. Subsection (3) of section 626.201, Florida
1590 Statutes, is amended, and subsection (4) is added to that
1591 section, to read:

1592 626.201 Investigation.—

1593 (3) An inquiry or investigation of the applicant's
1594 qualifications, character, experience, background, and fitness
1595 must include submission of the applicant's fingerprints, in

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1596 accordance with s. 626.171(4), to the Department of Law
1597 Enforcement and the Federal Bureau of Investigation and
1598 consideration of any state criminal records, federal criminal
1599 records, or local criminal records obtained from these agencies
1600 or from local law enforcement agencies.

1601 (4) The expiration, nonrenewal, or surrender of a license
1602 under this chapter does not eliminate jurisdiction of the
1603 licensing authority to investigate and prosecute for a violation
1604 committed by the licensee while licensed under this chapter. The
1605 prosecution of any matter may be initiated or continued
1606 notwithstanding the withdrawal of a complaint.

1607 Section 35. Section 626.202, Florida Statutes, is amended
1608 to read:

1609 626.202 Fingerprinting requirements.—

1610 (1) The requirements for completion and submission of
1611 fingerprints under this chapter in accordance with s. 626.171(4)
1612 are deemed to be met when an individual currently licensed under
1613 this chapter seeks additional licensure and has previously
1614 submitted fingerprints to the department within the past 48
1615 months. However, the department may require the individual to
1616 file fingerprints if it has reason to believe that an applicant
1617 or licensee has been found guilty of, or pleaded guilty or nolo
1618 contendere to, a felony or a crime related to the business of
1619 insurance in this state or any other state or jurisdiction.

1620 (2) If there is a change in ownership or control of any
1621 entity licensed under this chapter, or if a new partner,
1622 officer, or director is employed or appointed, a set of
1623 fingerprints of the new owner, partner, officer, or director
1624 must be filed with the department or office within 30 days after

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1625 the change. The acquisition of 10 percent or more of the voting
1626 securities of a licensed entity is considered a change of
1627 ownership or control. The fingerprints must be submitted in
1628 accordance with s. 626.171(4) ~~taken by a law enforcement agency~~
1629 ~~or other department approved entity and be accompanied by the~~
1630 ~~fingerprint processing fee in s. 624.501.~~

1631 Section 36. Paragraph (j) of subsection (2) of section
1632 626.221, Florida Statutes, is amended to read:

1633 626.221 Examination requirement; exemptions.—

1634 (2) However, an examination is not necessary for any of the
1635 following:

1636 (j) An applicant for license as an all-lines adjuster who
1637 has the designation of Accredited Claims Adjuster (ACA) from a
1638 regionally accredited postsecondary institution in this state,
1639 Certified All Lines Adjuster (CALA) from Kaplan Financial
1640 Education, Associate in Claims (AIC) from the Insurance
1641 Institute of America, Professional Claims Adjuster (PCA) from
1642 the Professional Career Institute, Professional Property
1643 Insurance Adjuster (PPIA) from the HurriClaim Training Academy,
1644 Certified Adjuster (CA) from ALL LINES Training, Certified
1645 Claims Adjuster (CCA) from AE21 Incorporated, Claims Adjuster
1646 Certified Professional (CACP) from WebCE, Inc., Accredited
1647 Insurance Claims Specialist (AICS) from Encore Claim Services,
1648 or Universal Claims Certification (UCC) from Claims and
1649 Litigation Management Alliance (CLM) whose curriculum has been
1650 approved by the department and which includes comprehensive
1651 analysis of basic property and casualty lines of insurance and
1652 testing at least equal to that of standard department testing
1653 for the all-lines adjuster license. The department shall adopt

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1654 rules establishing standards for the approval of curriculum.

1655 Section 37. Subsection (6) of section 626.311, Florida
1656 Statutes, is amended to read:

1657 626.311 Scope of license.—

1658 (6) An agent who appoints his or her license as an
1659 unaffiliated insurance agent may not hold an appointment from an
1660 insurer for any license he or she holds, with the exception of
1661 an adjuster license; transact, solicit, or service an insurance
1662 contract on behalf of an insurer; interfere with commissions
1663 received or to be received by an insurer-appointed insurance
1664 agent or an insurance agency contracted with or employing
1665 insurer-appointed insurance agents; or receive compensation or
1666 any other thing of value from an insurer, an insurer-appointed
1667 insurance agent, or an insurance agency contracted with or
1668 employing insurer-appointed insurance agents for any transaction
1669 or referral occurring after the date of appointment as an
1670 unaffiliated insurance agent. An unaffiliated insurance agent
1671 may continue to receive commissions on sales that occurred
1672 before the date of appointment as an unaffiliated insurance
1673 agent if the receipt of such commissions is disclosed when
1674 making recommendations or evaluating products for a client that
1675 involve products of the entity from which the commissions are
1676 received. An adjuster who holds an adjuster license and who is
1677 also an unaffiliated insurance agent may obtain an adjuster
1678 appointment while maintaining his or her unaffiliated insurance
1679 agent appointment and may adjust claims and receive compensation
1680 in accordance with the authority granted by the adjuster license
1681 and appointment.

1682 Section 38. Paragraph (h) of subsection (1) of section

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1683 626.321, Florida Statutes, is amended to read:

1684 626.321 Limited licenses and registration.—

1685 (1) The department shall issue to a qualified applicant a
1686 license as agent authorized to transact a limited class of
1687 business in any of the following categories of limited lines
1688 insurance:

1689 (h) *Portable electronics insurance.*—License for property
1690 insurance or inland marine insurance that covers only loss,
1691 theft, mechanical failure, malfunction, or damage for portable
1692 electronics.

1693 1. The license may be issued only to:

1694 a. Employees or authorized representatives of a licensed
1695 general lines agent; or

1696 b. The lead business location of a retail vendor that sells
1697 portable electronics insurance. The lead business location must
1698 have a contractual relationship with a general lines agent.

1699 2. Employees or authorized representatives of a licensee
1700 under subparagraph 1. may sell or offer for sale portable
1701 electronics coverage without being subject to licensure as an
1702 insurance agent if:

1703 a. Such insurance is sold or offered for sale at a licensed
1704 location or at one of the licensee's branch locations if the
1705 branch location is appointed by the licensed lead business
1706 location or its appointing insurers;

1707 b. The insurer issuing the insurance directly supervises or
1708 appoints a general lines agent to supervise the sale of such
1709 insurance, including the development of a training program for
1710 the employees and authorized representatives of vendors that are
1711 directly engaged in the activity of selling or offering the

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1712 insurance; and

1713 c. At each location where the insurance is offered,
1714 brochures or other written materials that provide the
1715 information required by this subparagraph are made available to
1716 all prospective customers. The brochures or written materials
1717 may include information regarding portable electronics
1718 insurance, service warranty agreements, or other incidental
1719 services or benefits offered by a licensee.

1720 3. Individuals not licensed to sell portable electronics
1721 insurance may not be paid commissions based on the sale of such
1722 coverage. However, a licensee who uses a compensation plan for
1723 employees and authorized representatives which includes
1724 supplemental compensation for the sale of noninsurance products,
1725 in addition to a regular salary or hourly wages, may include
1726 incidental compensation for the sale of portable electronics
1727 insurance as a component of the overall compensation plan.

1728 4. Brochures or other written materials related to portable
1729 electronics insurance must:

1730 a. Disclose that such insurance may duplicate coverage
1731 already provided by a customer's homeowners insurance policy,
1732 renters insurance policy, or other source of coverage;

1733 b. State that enrollment in insurance coverage is not
1734 required in order to purchase or lease portable electronics or
1735 services;

1736 c. Summarize the material terms of the insurance coverage,
1737 including the identity of the insurer, the identity of the
1738 supervising entity, the amount of any applicable deductible and
1739 how it is to be paid, the benefits of coverage, and key terms
1740 and conditions of coverage, such as whether portable electronics

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1741 may be repaired or replaced with similar make and model
1742 reconditioned or nonoriginal manufacturer parts or equipment;

1743 d. Summarize the process for filing a claim, including a
1744 description of how to return portable electronics and the
1745 maximum fee applicable if the customer fails to comply with
1746 equipment return requirements; and

1747 e. State that an enrolled customer may cancel coverage at
1748 any time and that the person paying the premium will receive a
1749 refund of any unearned premium.

1750 5. A licensed and appointed general lines agent is not
1751 required to obtain a portable electronics insurance license to
1752 offer or sell portable electronics insurance at locations
1753 already licensed as an insurance agency, but may apply for a
1754 portable electronics insurance license for branch locations not
1755 otherwise licensed to sell insurance.

1756 6. A portable electronics license authorizes the sale of
1757 individual policies or certificates under a group or master
1758 insurance policy. The license also authorizes the sale of
1759 service warranty agreements covering only portable electronics
1760 to the same extent as if licensed under s. 634.419 or s.
1761 634.420.

1762 7. A licensee may bill and collect the premium for the
1763 purchase of portable electronics insurance provided that:

1764 a. If the insurance is included with the purchase or lease
1765 of portable electronics or related services, the licensee
1766 clearly and conspicuously discloses that insurance coverage is
1767 included with the purchase. Disclosure of the stand-alone cost
1768 of the premium for same or similar insurance must be made on the
1769 customer's bill and in any marketing materials made available at

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1770 the point of sale. If the insurance is not included, the charge
1771 to the customer for the insurance must be separately itemized on
1772 the customer's bill.

1773 b. Premiums are incidental to other fees collected, are
1774 maintained in a manner that is readily identifiable, and are
1775 accounted for and remitted to the insurer or supervising entity
1776 within 60 days of receipt. Licensees are not required to
1777 maintain such funds in a segregated account.

1778 c. All funds received by a licensee from an enrolled
1779 customer for the sale of the insurance are considered funds held
1780 in trust by the licensee in a fiduciary capacity for the benefit
1781 of the insurer. Licensees may receive compensation for billing
1782 and collection services.

1783 8. Notwithstanding any other provision of law, the terms
1784 for the termination or modification of coverage under a policy
1785 of portable electronics insurance are those set forth in the
1786 policy.

1787 9. Notice or correspondence required by the policy, or
1788 otherwise required by law, may be provided by electronic means
1789 if the insurer or licensee maintains proof that the notice or
1790 correspondence was sent. Such notice or correspondence may be
1791 sent on behalf of the insurer or licensee by the general lines
1792 agent appointed by the insurer to supervise the administration
1793 of the program. For purposes of this subparagraph, an enrolled
1794 customer's provision of an electronic mail address to the
1795 insurer or licensee is deemed to be consent to receive notices
1796 and correspondence by electronic means if a conspicuously
1797 located disclosure is provided to the customer indicating the
1798 same.

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1799 10. The ~~provisions of this chapter requiring submission of~~
1800 fingerprints requirements in s. 626.171(4) do not apply to
1801 licenses issued to qualified entities under this paragraph.

1802 11. A branch location that sells portable electronics
1803 insurance may, in lieu of obtaining an appointment from an
1804 insurer or warranty association, obtain a single appointment
1805 from the associated lead business location licensee and pay the
1806 prescribed appointment fee under s. 624.501 if the lead business
1807 location has a single appointment from each insurer or warranty
1808 association represented and such appointment applies to the lead
1809 business location and all of its branch locations. Branch
1810 location appointments shall be renewed 24 months after the
1811 initial appointment date of the lead business location and every
1812 24 months thereafter. Notwithstanding s. 624.501, the renewal
1813 fee applicable to such branch location appointments is \$30 per
1814 appointment.

1815 12. For purposes of this paragraph:

1816 a. "Branch location" means any physical location in this
1817 state at which a licensee offers its products or services for
1818 sale.

1819 b. "Portable electronics" means personal, self-contained,
1820 easily carried by an individual, battery-operated electronic
1821 communication, viewing, listening, recording, gaming, computing
1822 or global positioning devices, including cell or satellite
1823 phones, pagers, personal global positioning satellite units,
1824 portable computers, portable audio listening, video viewing or
1825 recording devices, digital cameras, video camcorders, portable
1826 gaming systems, docking stations, automatic answering devices,
1827 and other similar devices and their accessories, and service

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1828 related to the use of such devices.

1829 c. "Portable electronics transaction" means the sale or
1830 lease of portable electronics or a related service, including
1831 portable electronics insurance.

1832 Section 39. Subsection (5) of section 626.601, Florida
1833 Statutes, is amended to read:

1834 626.601 Improper conduct; inquiry; fingerprinting.—

1835 (5) If the department or office, after investigation, has
1836 reason to believe that an individual may have been found guilty
1837 of or pleaded guilty or nolo contendere to a felony or a crime
1838 related to the business of insurance in this or any other state
1839 or jurisdiction, the department or office may require the
1840 individual to file with the department or office a complete set
1841 of his or her fingerprints, in accordance with s. 626.171(4),
1842 which shall be accompanied by the fingerprint processing fee set
1843 forth in s. 624.501. The fingerprints shall be taken by an
1844 authorized law enforcement agency or other department-approved
1845 entity.

1846 Section 40. Subsection (2) of section 626.7845, Florida
1847 Statutes, is amended to read:

1848 626.7845 Prohibition against unlicensed transaction of life
1849 insurance.—

1850 (2) Except as provided in s. 626.112(6), with respect to
1851 any line of authority specified in s. 626.015(13) ~~s.~~
1852 ~~626.015(12)~~, an individual may not, unless licensed as a life
1853 agent:

1854 (a) Solicit insurance or annuities or procure applications;

1855 (b) In this state, engage or hold himself or herself out as
1856 engaging in the business of analyzing or abstracting insurance

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1857 policies or of counseling or advising or giving opinions to
1858 persons relative to insurance or insurance contracts, unless the
1859 individual is:

1860 1. A consulting actuary advising insurers;

1861 2. An employee of a labor union, association, employer, or
1862 other business entity, or the subsidiaries and affiliates of
1863 each, who counsels and advises such entity or entities relative
1864 to their interests and those of their members or employees under
1865 insurance benefit plans; or

1866 3. A trustee advising a settlor, a beneficiary, or a person
1867 regarding his or her interests in a trust, relative to insurance
1868 benefit plans; or

1869 (c) In this state, from this state, or with a resident of
1870 this state, offer or attempt to negotiate on behalf of another
1871 person a viatical settlement contract as defined in s. 626.9911.

1872 Section 41. Paragraph (d) of subsection (2) of section
1873 626.8411, Florida Statutes, is amended, and paragraph (f) is
1874 added to subsection (1) of that section, to read:

1875 626.8411 Application of Florida Insurance Code provisions
1876 to title insurance agents or agencies.—

1877 (1) The following provisions applicable to general lines
1878 agents or agencies also apply to title insurance agents or
1879 agencies:

1880 (f) Section 626.172(2)(f), relating to fingerprints.

1881 (2) The following provisions of part I do not apply to
1882 title insurance agents or title insurance agencies:

1883 (d) Section 626.172, except for paragraph (2)(f) of that
1884 section, relating to agent in full-time charge.

1885 Section 42. Paragraph (b) of subsection (1) of section

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1886 626.8412, Florida Statutes, is amended to read:

1887 626.8412 License and appointments required.—

1888 (1) Except as otherwise provided in this part:

1889 (b) A title insurance agent may not sell a title insurance
1890 policy issued by an insurer for which the agent and the agency
1891 do ~~does~~ not hold a current appointment.

1892 Section 43. Paragraph (a) of subsection (3) of section
1893 626.8417, Florida Statutes, is amended to read:

1894 626.8417 Title insurance agent licensure; exemptions.—

1895 (3) The department may not grant or issue a license as a
1896 title insurance agent to an individual who is found by the
1897 department to be untrustworthy or incompetent, who does not meet
1898 the qualifications for examination specified in s. 626.8414, or
1899 who does not meet the following qualifications:

1900 (a) Within the 4 years immediately preceding the date of
1901 the application for license, the applicant must have completed a
1902 40-hour ~~classroom~~ course in title insurance, 3 hours of which
1903 are on the subject matter of ethics, as approved by the
1904 department, or must have had at least 12 months of experience in
1905 responsible title insurance duties, under the supervision of a
1906 licensed title insurance agent, title insurer, or attorney while
1907 working in the title insurance business as a substantially full-
1908 time, bona fide employee of a title insurance agency, title
1909 insurance agent, title insurer, or attorney who conducts real
1910 estate closing transactions and issues title insurance policies
1911 but who is exempt from licensure under subsection (4). If an
1912 applicant's qualifications are based upon the periods of
1913 employment at responsible title insurance duties, the applicant
1914 must submit, with the license application, an affidavit of the

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1915 applicant and of the employer affirming the period of such
1916 employment, that the employment was substantially full time, and
1917 giving a brief abstract of the nature of the duties performed by
1918 the applicant.

1919 Section 44. Section 626.8421, Florida Statutes, is amended
1920 to read:

1921 626.8421 Number of appointments permitted or required.—A
1922 title agent and a title agency shall be required to have a
1923 separate appointment as to each insurer by which they are ~~he or~~
1924 ~~she is~~ appointed as agents ~~agent~~. As a part of each appointment
1925 there shall be a certified statement or affidavit of an
1926 appropriate officer or official of the appointing insurer
1927 stating that to the best of the insurer's knowledge and belief
1928 the applicant, or its principals in the case of a corporation or
1929 other legal entity, has met the requirements of s. 626.8417.

1930 Section 45. Subsections (1) and (2) of section 626.843,
1931 Florida Statutes, are amended to read:

1932 626.843 Renewal, continuation, reinstatement, termination
1933 of title insurance agent's and title insurance agency's
1934 appointments ~~appointment~~.—

1935 (1) Appointments ~~the appointment~~ of a title insurance agent
1936 and a title insurance agency shall continue in force until
1937 suspended, revoked, or otherwise terminated, but subject to a
1938 renewed request filed by the insurer every 24 months after the
1939 original issue dates ~~date~~ of the appointments ~~appointment~~,
1940 accompanied by payments ~~payment~~ of the renewal appointment fees
1941 ~~fee~~ and taxes as prescribed in s. 624.501.

1942 (2) Title insurance agent and title insurance agency
1943 appointments shall be renewed pursuant to s. 626.381 for

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1944 insurance representatives in general.

1945 Section 46. Subsection (1) of section 626.8433, Florida
1946 Statutes, is amended to read:

1947 626.8433 Filing of reasons for terminating appointment of
1948 title insurance agent and title insurance agency; confidential
1949 information.—

1950 (1) Any title insurer that is terminating the appointment
1951 of a title insurance agent or title insurance agency, whether
1952 such termination is by direct action of the appointing title
1953 insurer or by failure to renew or continue the appointment as
1954 provided, shall file with the department a statement of the
1955 reasons, if any, for, and the facts relative to, such
1956 termination.

1957 Section 47. Section 626.8447, Florida Statutes, is amended
1958 to read:

1959 626.8447 Effect of suspension or revocation upon other
1960 licensees, appointees.—In case of the suspension or revocation
1961 of the license and appointment of any title insurance agent or
1962 title insurance agency, the licenses and appointments of all
1963 other title insurance agents who knowingly were parties to the
1964 act that ~~which~~ formed the ground for such suspension or
1965 revocation may likewise be suspended or revoked for the same
1966 period as that of the offending title insurance agent or title
1967 insurance agency, but such suspension or revocation does ~~shall~~
1968 not prevent any title insurance agent, except the one whose
1969 license and appointment was first suspended or revoked, from
1970 being issued an appointment for some other title insurer.

1971 Section 48. Subsection (10) of section 626.854, Florida
1972 Statutes, is amended to read:

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1973 626.854 "Public adjuster" defined; prohibitions.—The
1974 Legislature finds that it is necessary for the protection of the
1975 public to regulate public insurance adjusters and to prevent the
1976 unauthorized practice of law.

1977 (10) (a) If a public adjuster enters into a contract with an
1978 insured or claimant to reopen a claim or file a supplemental
1979 claim that seeks additional payments for a claim that has been
1980 previously paid in part or in full or settled by the insurer,
1981 the public adjuster may not charge, agree to, or accept from any
1982 source compensation, payment, commission, fee, or any other
1983 thing of value based on a previous settlement or previous claim
1984 payments by the insurer for the same cause of loss. The charge,
1985 compensation, payment, commission, fee, or any other thing of
1986 value must be based only on the recovery allocated to the
1987 insured for covered damages, exclusive of attorney fees and
1988 costs, ~~claim payments or settlement~~ obtained through the work of
1989 the public adjuster after entering into the contract with the
1990 insured or claimant. Compensation for the reopened or
1991 supplemental claim may not exceed 20 percent of the reopened or
1992 supplemental claim payment. In no event shall the contracts
1993 described in this paragraph exceed the limitations in paragraph
1994 (b).

1995 (b) A public adjuster may not charge, agree to, or accept
1996 from any source compensation, payment, commission, fee, or any
1997 other thing of value in excess of:

1998 1. Ten percent of the amount of insurance recovery
1999 allocated to the insured for covered damages, exclusive of
2000 attorney fees and costs, ~~claim payments made~~ by the insurer for
2001 claims based on events that are the subject of a declaration of

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2002 a state of emergency by the Governor. This provision applies to
2003 claims made during the year after the declaration of emergency.
2004 After that year, the limitations in subparagraph 2. apply.

2005 2. Twenty percent of the amount of insurance recovery
2006 allocated to the insured for covered damages, exclusive of
2007 attorney fees and costs, ~~claim payments made~~ by the insurer for
2008 claims that are not based on events that are the subject of a
2009 declaration of a state of emergency by the Governor.

2010 (c) Insurance claim payments made by the insurer do not
2011 include policy deductibles, and public adjuster compensation may
2012 not be based on the deductible portion of a claim.

2013 (d) Public adjuster compensation may not be based on
2014 amounts attributable to additional living expenses unless such
2015 compensation is affirmatively agreed to in a separate agreement
2016 that includes a disclosure in substantially the following form:
2017 "I agree to retain and compensate the public adjuster for
2018 adjusting my additional living expenses and securing payment
2019 from my insurer for amounts attributable to additional living
2020 expenses payable under the policy issued on my (home/mobile
2021 home/condominium unit)."

2022 (e) Public adjuster compensation may not be increased based
2023 on a claim being resolved by litigation.

2024 (f) Any maneuver, shift, or device through which the limits
2025 on compensation set forth in this subsection are exceeded is a
2026 violation of this chapter punishable as provided under s.
2027 626.8698.

2028 Section 49. Section 626.8561, Florida Statutes, is amended
2029 to read:

2030 626.8561 "Public adjuster apprentice" defined.—The term

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2031 "public adjuster apprentice" means a person licensed as an all-
2032 lines adjuster who:

2033 (1) Is appointed and employed or contracted by ~~a public~~
2034 ~~adjuster or~~ a public adjusting firm;

2035 (2) Assists the ~~public adjuster or~~ public adjusting firm in
2036 ascertaining and determining the amount of any claim, loss, or
2037 damage payable under an insurance contract, or who undertakes to
2038 effect settlement of such claim, loss, or damage; and

2039 (3) Satisfies the requirements of s. 626.8651.

2040 Section 50. Paragraph (e) of subsection (1) and subsection
2041 (2) of section 626.865, Florida Statutes, are amended to read:

2042 626.865 Public adjuster's qualifications, bond.—

2043 (1) The department shall issue a license to an applicant
2044 for a public adjuster's license upon determining that the
2045 applicant has paid the applicable fees specified in s. 624.501
2046 and possesses the following qualifications:

2047 (e) Has been licensed and appointed in this state as a
2048 nonresident public adjuster on a continual basis for the
2049 previous 6 months, or has been licensed as an all-lines
2050 adjuster, and has been appointed on a continual basis for the
2051 previous 6 months as a public adjuster apprentice under s.
2052 626.8561, as an independent adjuster under s. 626.855, or as a
2053 company employee adjuster under s. 626.856.

2054 (2) At the time of application for license as a public
2055 adjuster, the applicant shall file with the department a bond
2056 executed and issued by a surety insurer authorized to transact
2057 such business in this state, in the amount of \$50,000,
2058 conditioned for the faithful performance of his or her duties as
2059 a public adjuster under the license for which the applicant has

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2060 applied, and thereafter maintain the bond unimpaired throughout
2061 the existence of the license ~~and for at least 1 year after~~
2062 ~~termination of the license.~~

2063 (a) The bond must ~~shall~~ be in favor of the department and
2064 must ~~shall~~ specifically authorize recovery by the department of
2065 the damages sustained in case the licensee is guilty of fraud or
2066 unfair practices in connection with his or her business as
2067 public adjuster.

2068 (b) The bond must remain in effect for 1 year after the
2069 expiration or termination of the license.

2070 (c) The aggregate liability of the surety for all such
2071 damages may not ~~shall in no event~~ exceed the amount of the bond.
2072 The ~~Such~~ bond may ~~shall~~ not be terminated unless at least 30
2073 days' written notice is given to the licensee and filed with the
2074 department.

2075 Section 51. Paragraph (a) of subsection (1) and subsection
2076 (3) of section 626.8651, Florida Statutes, are amended to read:

2077 626.8651 Public adjuster apprentice appointment;
2078 qualifications.—

2079 (1) (a) The department shall issue an appointment as a
2080 public adjuster apprentice to a licensee who:

2081 1. Is licensed as an all-lines adjuster under s. 626.866;
2082 2. Has filed with the department a bond executed and issued
2083 by a surety insurer that is authorized to transact such business
2084 in this state in the amount of \$50,000, which is conditioned
2085 upon the faithful performance of his or her duties as a public
2086 adjuster apprentice; and

2087 3. Maintains such bond unimpaired throughout the existence
2088 of the appointment. The bond must remain in effect for 1 year

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2089 after the expiration or termination of the license ~~and for at~~
2090 ~~least 1 year after termination of the appointment.~~

2091 (3) A public adjuster apprentice has the same authority as
2092 the licensed public adjuster or public adjusting firm that
2093 employs the apprentice except that an apprentice may not execute
2094 contracts for the services of a public adjuster or public
2095 adjusting firm. An individual may not be, act as, or hold
2096 himself or herself out to be a public adjuster apprentice unless
2097 the individual is licensed as an all-lines adjuster and holds a
2098 current appointment by a licensed ~~public all-lines adjuster or a~~
2099 public adjusting firm that has designated with the department a
2100 primary ~~employs a licensed public~~ adjuster as required by s.
2101 626.8695.

2102 Section 52. Section 626.8696, Florida Statutes, is amended
2103 to read:

2104 626.8696 Application for adjusting firm license.—

2105 (1) The application for an adjusting firm license must
2106 include:

2107 (a) The name of each majority owner, partner, officer, and
2108 director of the adjusting firm.

2109 (b) The resident address of each person required to be
2110 listed in the application under paragraph (a).

2111 (c) The name of the adjusting firm and its principal
2112 business address.

2113 (d) The location of each adjusting firm office and the name
2114 under which each office conducts or will conduct business.

2115 (e) The name and license number of the designated primary
2116 adjuster for each adjusting firm location as required in s.
2117 626.8695.

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2118 (f) The fingerprints of each individual required to be
2119 listed in the application under paragraph (a), filed in
2120 accordance with s. 626.171(4). However, fingerprints need not be
2121 filed for an individual who is currently licensed and appointed
2122 under this chapter.

2123 (g) Any additional information that the department
2124 requires.

2125 (2) An application for an adjusting firm license must be
2126 signed by one of the individuals required to be listed in the
2127 application under paragraph (1)(a) each owner of the firm. ~~If~~
2128 ~~the firm is incorporated, the application must be signed by the~~
2129 ~~president and secretary of the corporation.~~

2130 ~~(3) Each application must be accompanied by payment of any~~
2131 ~~applicable fee as prescribed in s. 624.501.~~

2132 ~~(4) License fees are not refundable.~~

2133 ~~(5) An adjusting firm required to be licensed pursuant to~~
2134 ~~s. 626.8695 must remain so licensed for a period of 3 years from~~
2135 ~~the date of licensure, unless the license is suspended or~~
2136 ~~revoked. The department may suspend or revoke the adjusting~~
2137 ~~firm's authority to do business for activities occurring during~~
2138 ~~the time the firm is licensed, regardless of whether the~~
2139 ~~licensing period has terminated.~~

2140 Section 53. Subsection (3) of section 626.8732, Florida
2141 Statutes, is amended to read:

2142 626.8732 Nonresident public adjuster's qualifications,
2143 bond.—

2144 (3) At the time of application for license as a nonresident
2145 public adjuster, the applicant shall file with the department a
2146 bond executed and issued by a surety insurer authorized to

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2147 transact surety business in this state, in the amount of
2148 \$50,000, conditioned for the faithful performance of his or her
2149 duties as a nonresident public adjuster under the license
2150 applied for. Thereafter, the applicant shall maintain the bond
2151 unimpaired throughout the existence of the license and for 1
2152 year after the expiration or termination of the license.

2153 (a) The bond must be in favor of the department and must
2154 specifically authorize recovery by the department of the damages
2155 sustained if the licensee commits fraud or unfair practices in
2156 connection with his or her business as nonresident public
2157 adjuster.

2158 (b) The aggregate liability of the surety for all the
2159 damages may not exceed the amount of the bond. The bond may not
2160 be terminated unless at least 30 days' written notice is given
2161 to the licensee and filed with the department.

2162 Section 54. Paragraph (a) of subsection (2) of section
2163 626.8734, Florida Statutes, is amended to read:

2164 626.8734 Nonresident all-lines adjuster license
2165 qualifications.—

2166 (2) The applicant must furnish the following with his or
2167 her application:

2168 (a) A complete set of his or her fingerprints in accordance
2169 with s. 626.171(4). ~~The applicant's fingerprints must be~~
2170 ~~certified by an authorized law enforcement officer.~~

2171 Section 55. Section 626.906, Florida Statutes, is amended
2172 to read:

2173 626.906 Acts constituting Chief Financial Officer as
2174 process agent.—Any of the following acts in this state, effected
2175 by mail or otherwise, by an unauthorized foreign insurer, alien

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2176 insurer, or person representing or aiding such an insurer is
2177 equivalent to and shall constitute an appointment by such
2178 insurer or person representing or aiding such insurer of the
2179 Chief Financial Officer to be its true and lawful agent
2180 ~~attorney~~, upon whom may be served all lawful process in any
2181 action, suit, or proceeding instituted by or on behalf of an
2182 insured or beneficiary, arising out of any such contract of
2183 insurance; and any such act shall be signification of the
2184 insurer's or person's agreement that such service of process is
2185 of the same legal force and validity as personal service of
2186 process in this state upon such insurer or person representing
2187 or aiding such insurer:

2188 (1) The issuance or delivery of contracts of insurance to
2189 residents of this state or to corporations authorized to do
2190 business therein;

2191 (2) The solicitation of applications for such contracts;

2192 (3) The collection of premiums, membership fees,
2193 assessments, or other considerations for such contracts; or

2194 (4) Any other transaction of insurance.

2195 Section 56. Subsection (4) of section 626.912, Florida
2196 Statutes, is amended to read:

2197 626.912 Exemptions from ss. 626.904-626.911.—The provisions
2198 of ss. 626.904-626.911 do not apply to any action, suit, or
2199 proceeding against any unauthorized foreign insurer, alien
2200 insurer, or person representing or aiding such an insurer
2201 arising out of any contract of insurance:

2202 (4) Issued under and in accordance with the Surplus Lines
2203 Law, when such insurer or person representing or aiding such
2204 insurer enters a general appearance or when such contract of

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2205 insurance contains a provision designating the Chief Financial
2206 Officer or designating a Florida resident agent to be the true
2207 and lawful agent ~~attorney~~ of such unauthorized insurer or person
2208 representing or aiding such insurer upon whom may be served all
2209 lawful process in any action, suit, or proceeding instituted by
2210 or on behalf of an insured or person representing or aiding such
2211 insurer or beneficiary arising out of any such contract of
2212 insurance; and service of process effected on such Chief
2213 Financial Officer or such resident agent shall be deemed to
2214 confer complete jurisdiction over such unauthorized insurer or
2215 person representing or aiding such insurer in such action.

2216 Section 57. Subsections (3) and (4) of section 626.937,
2217 Florida Statutes, are amended to read:

2218 626.937 Actions against insurer; service of process.-

2219 (3) Each unauthorized insurer requesting eligibility
2220 pursuant to s. 626.918 shall file with the department its
2221 appointment of the Chief Financial Officer, on a form as
2222 furnished by the department, as its agent ~~attorney~~ to receive
2223 service of all legal process issued against it in any civil
2224 action or proceeding in this state, and agreeing that process so
2225 served shall be valid and binding upon the insurer. The
2226 appointment shall be irrevocable, shall bind the insurer and any
2227 successor in interest as to the assets or liabilities of the
2228 insurer, and shall remain in effect as long as there is
2229 outstanding in this state any obligation or liability of the
2230 insurer resulting from its insurance transactions therein.

2231 (4) At the time of such appointment of the Chief Financial
2232 Officer as its process agent, the insurer shall file with the
2233 department designation of the name and e-mail address of the

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2234 person to whom process against it served upon the Chief
2235 Financial Officer is to be made available through the
2236 department's secure online portal ~~forwarded~~. The insurer may
2237 change the designation at any time by a new filing.

2238 Section 58. Subsection (5) of section 626.9953, Florida
2239 Statutes, is amended to read:

2240 626.9953 Qualifications for registration; application
2241 required.—

2242 (5) An applicant must submit a set of his or her
2243 fingerprints in accordance with s. 626.171(4) ~~to the department~~
2244 ~~and pay the processing fee established under s. 624.501(23)~~. The
2245 department shall submit the applicant's fingerprints to the
2246 Department of Law Enforcement for processing state criminal
2247 history records checks and local criminal records checks through
2248 local law enforcement agencies and for forwarding to the Federal
2249 Bureau of Investigation for national criminal history records
2250 checks. The fingerprints shall be taken by a law enforcement
2251 agency, a designated examination center, or another department-
2252 approved entity. The department may not approve an application
2253 for registration as a navigator if fingerprints have not been
2254 submitted.

2255 Section 59. Paragraphs (e) and (f) are added to subsection
2256 (4) of section 633.135, Florida Statutes, to read:

2257 633.135 Firefighter Assistance Grant Program.—

2258 (4) Funds shall be used to:

2259 (e) Purchase other equipment and tools that improve
2260 firesafety and fire rescue capabilities for firefighters.

2261 (f) Purchase protective clothing and equipment compliant
2262 with NFPA 1977, "Standard on Protective Clothing and Equipment

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2263 for Wildland Fire Fighting and Urban Interface Fire Fighting.”

2264 Section 60. Subsections (4) and (5) of section 633.216,
2265 Florida Statutes, are amended to read:

2266 633.216 Inspection of buildings and equipment; orders;
2267 firesafety inspection training requirements; certification;
2268 disciplinary action.—The State Fire Marshal and her or his
2269 agents or persons authorized to enforce laws and rules of the
2270 State Fire Marshal shall, at any reasonable hour, when the State
2271 Fire Marshal has reasonable cause to believe that a violation of
2272 this chapter or s. 509.215, or a rule adopted thereunder, or a
2273 minimum firesafety code adopted by the State Fire Marshal or a
2274 local authority, may exist, inspect any and all buildings and
2275 structures which are subject to the requirements of this chapter
2276 or s. 509.215 and rules adopted thereunder. The authority to
2277 inspect shall extend to all equipment, vehicles, and chemicals
2278 which are located on or within the premises of any such building
2279 or structure.

2280 (4) Every firesafety inspector certificate is valid for a
2281 period of 4 years from the date of issuance. Renewal of
2282 certification is subject to the affected person’s completing
2283 proper application for renewal and meeting all of the
2284 requirements for renewal as established under this chapter or by
2285 rule adopted under this chapter, which must include completion
2286 of at least 54 hours during the preceding 4-year period of
2287 continuing education as required by the rule of the department
2288 ~~or, in lieu thereof, successful passage of an examination as~~
2289 ~~established by the department.~~

2290 ~~(5) A previously certified firesafety inspector whose~~
2291 ~~certification has lapsed for 8 years or more must repeat the~~

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2292 ~~fire safety inspector training as specified by the division.~~

2293 Section 61. Paragraph (b) of subsection (4) and paragraphs
2294 (a) and (c) of subsection (6) of section 633.408, Florida
2295 Statutes, are amended to read:

2296 633.408 Firefighter and volunteer firefighter training and
2297 certification.—

2298 (4) The division shall issue a Firefighter Certificate of
2299 Compliance to an individual who does all of the following:

2300 (b) Passes the Minimum Standards Course certification
2301 ~~examination~~ within 12 months after completing the required
2302 courses.

2303 (6) (a) The division may issue a Special Certificate of
2304 Compliance to an individual who does all of the following:

2305 1. Satisfactorily completes the course established by rule
2306 by the division and successfully passes any examination
2307 corresponding to such course ~~in paragraph (1) (b)~~ to obtain a
2308 Special Certificate of Compliance.

2309 2. ~~Passes the examination established in paragraph (1) (b)~~
2310 ~~to obtain a Special Certificate of Compliance.~~

2311 3. Possesses the qualifications in s. 633.412.

2312 ~~(c) In order to retain a Special Certificate of Compliance,~~
2313 ~~every 4 years an individual must:~~

2314 1. ~~Be active as a firefighter;~~

2315 2. ~~Maintain a current and valid fire service instructor~~
2316 ~~certificate, instruct at least 40 hours during the 4-year~~
2317 ~~period, and provide proof of such instruction to the division,~~
2318 ~~which proof must be registered in an electronic database~~
2319 ~~designated by the division; or~~

2320 3. ~~Within 6 months before the 4-year period expires,~~

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2321 ~~successfully complete a Firefighter Retention Refresher Course~~
2322 ~~consisting of a minimum of 40 hours of training as prescribed by~~
2323 ~~rule.~~

2324 Section 62. Subsections (1) and (4) of section 633.414,
2325 Florida Statutes, are amended to read:

2326 633.414 Retention of firefighter and volunteer firefighter
2327 certifications.—

2328 (1) In order for a firefighter to retain her or his
2329 Firefighter Certificate of Compliance or Special Certificate of
2330 Compliance, every 4 years he or she must meet the requirements
2331 for renewal provided in this chapter and by rule, which must
2332 include at least one of the following:

2333 (a) Be active as a firefighter. As used in this section,
2334 the term "active" means being employed as a firefighter or
2335 providing service as a volunteer firefighter as evidenced by the
2336 individual's name appearing on a fire service provider's
2337 employment roster in the Florida State Fire College database or
2338 a letter by the fire service provider attesting to dates of
2339 employment.

2340 (b) Maintain a current and valid fire service instructor
2341 certificate, instruct at least 40 hours during the 4-year
2342 period, and provide proof of such instruction to the division,
2343 which proof must be registered in an electronic database
2344 designated by the division.

2345 (c) Before the expiration of the certificate ~~Within 6~~
2346 ~~months before the 4-year period expires~~, successfully complete a
2347 Firefighter Retention Refresher Course consisting of a minimum
2348 of 40 hours of training to be prescribed by rule.

2349 (d) Before the expiration of the certificate ~~Within 6~~

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2350 ~~months before the 4-year period expires,~~ successfully retake and
2351 pass the Minimum Standards Course examination pursuant to s.
2352 633.408.

2353 ~~(4) For the purposes of this section, the term "active"~~
2354 ~~means being employed as a firefighter or providing service as a~~
2355 ~~volunteer firefighter for a cumulative period of 6 months within~~
2356 ~~a 4-year period.~~

2357

2358 The 4-year period may, in the discretion of the department, be
2359 extended to 12 months after discharge from military service if
2360 the military service does not exceed 3 years, but in no event
2361 more than 6 years from the date of issue or renewal, if
2362 applicable, for an honorably discharged veteran of the United
2363 States Armed Forces or the spouse of such a veteran. A qualified
2364 individual must provide a copy of a military identification
2365 card, military dependent identification card, military service
2366 record, military personnel file, veteran record, discharge
2367 paper, or separation document that indicates such member is
2368 currently in good standing or such veteran is honorably
2369 discharged.

2370 Section 63. Subsection (4) of section 648.34, Florida
2371 Statutes, is amended to read:

2372 648.34 Bail bond agents; qualifications.—

2373 (4) The applicant shall furnish, with his or her
2374 application, a complete set of his or her fingerprints in
2375 accordance with s. 626.171(4) and a recent credential-sized,
2376 fullface photograph of the applicant. ~~The applicant's~~
2377 ~~fingerprints shall be certified by an authorized law enforcement~~
2378 ~~officer.~~ The department shall not authorize an applicant to take

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2379 the required examination until the department has received a
2380 report from the Department of Law Enforcement and the Federal
2381 Bureau of Investigation relative to the existence or
2382 nonexistence of a criminal history report based on the
2383 applicant's fingerprints.

2384 Section 64. Subsection (4) of section 648.355, Florida
2385 Statutes, is amended to read:

2386 648.355 Temporary limited license as limited surety agent
2387 or professional bail bond agent; pending examination.-

2388 (4) The applicant shall furnish, with the application for
2389 temporary license, a complete set of the applicant's
2390 fingerprints in accordance with s. 626.171(4) and a recent
2391 credential-sized, fullface photograph of the applicant. ~~The~~
2392 ~~applicant's fingerprints shall be certified by an authorized law~~
2393 ~~enforcement officer.~~ The department shall not issue a temporary
2394 license under this section until the department has received a
2395 report from the Department of Law Enforcement and the Federal
2396 Bureau of Investigation relative to the existence or
2397 nonexistence of a criminal history report based on the
2398 applicant's fingerprints.

2399 Section 65. Subsection (4) is added to section 648.46,
2400 Florida Statutes, to read:

2401 648.46 Procedure for disciplinary action against
2402 licensees.-

2403 (4) The expiration, nonrenewal, or surrender of licensure
2404 under this chapter does not eliminate the jurisdiction of the
2405 licensing authority to investigate and prosecute for a violation
2406 committed by a licensee while licensed under this chapter. The
2407 prosecution of any matter may be initiated or continued

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2408 notwithstanding the withdrawal of a complaint.

2409 Section 66. Paragraph (d) of subsection (2) and paragraphs
2410 (b), (c), and (e) of subsection (3) of section 766.105, Florida
2411 Statutes, are amended, and paragraph (i) is added to subsection
2412 (3) and subsection (4) is added to that section, to read:

2413 766.105 Florida Patient's Compensation Fund.—

2414 (2) COVERAGE.—

2415 (d)1. Any health care provider who participates in the fund
2416 and who does not meet the provisions of paragraph (b) shall not
2417 be covered by the fund.

2418 2. Annually, the Agency for Health Care Administration
2419 shall require documentation by each hospital that such hospital
2420 is in compliance, and will remain in compliance, with the
2421 provisions of this section. ~~The agency shall review the~~
2422 ~~documentation and then deliver the documentation to the board of~~
2423 ~~governors. At least 60 days before the time a license will be~~
2424 ~~issued or renewed, the agency shall request from the board of~~
2425 ~~governors a certification that each hospital is in compliance~~
2426 ~~with the provisions of this section. The board of governors~~
2427 ~~shall not be liable under the law for any erroneous~~
2428 ~~certification. The agency may not issue or renew the license of~~
2429 ~~any hospital which has not been certified by the board of~~
2430 ~~governors. The license of any hospital that fails to remain in~~
2431 ~~compliance or fails to provide such documentation shall be~~
2432 ~~revoked or suspended by the agency.~~

2433 (3) THE FUND.—

2434 (b) *Fund administration and operation.*—

2435 1. The fund shall operate subject to the supervision and
2436 approval of the Chief Financial Officer or his or her designee &

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2437 ~~board of governors consisting of a representative of the~~
2438 ~~insurance industry appointed by the Chief Financial Officer, an~~
2439 ~~attorney appointed by The Florida Bar, a representative of~~
2440 ~~physicians appointed by the Florida Medical Association, a~~
2441 ~~representative of physicians' insurance appointed by the Chief~~
2442 ~~Financial Officer, a representative of physicians' self-~~
2443 ~~insurance appointed by the Chief Financial Officer, two~~
2444 ~~representatives of hospitals appointed by the Florida Hospital~~
2445 ~~Association, a representative of hospital insurance appointed by~~
2446 ~~the Chief Financial Officer, a representative of hospital self-~~
2447 ~~insurance appointed by the Chief Financial Officer, a~~
2448 ~~representative of the osteopathic physicians' or podiatric~~
2449 ~~physicians' insurance or self-insurance appointed by the Chief~~
2450 ~~Financial Officer, and a representative of the general public~~
2451 ~~appointed by the Chief Financial Officer. The board of governors~~
2452 ~~shall, during the first meeting after June 30 of each year,~~
2453 ~~choose one of its members to serve as chair of the board and~~
2454 ~~another member to serve as vice chair of the board. The members~~
2455 ~~of the board shall be appointed to serve terms of 4 years,~~
2456 ~~except that the initial appointments of a representative of the~~
2457 ~~general public by the Chief Financial Officer, an attorney by~~
2458 ~~The Florida Bar, a representative of physicians by the Florida~~
2459 ~~Medical Association, and one of the two representatives of the~~
2460 ~~Florida Hospital Association shall be for terms of 3 years;~~
2461 ~~thereafter, such representatives shall be appointed for terms of~~
2462 ~~4 years. Subsequent to initial appointments for 4-year terms,~~
2463 ~~the representative of the osteopathic physicians' or podiatric~~
2464 ~~physicians' insurance or self-insurance appointed by the Chief~~
2465 ~~Financial Officer and the representative of hospital self-~~

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2466 ~~insurance appointed by the Chief Financial Officer shall be~~
2467 ~~appointed for 2-year terms; thereafter, such representatives~~
2468 ~~shall be appointed for terms of 4 years. Each appointed member~~
2469 ~~may designate in writing to the chair an alternate to act in the~~
2470 ~~member's absence or incapacity. A member of the board, or the~~
2471 ~~member's alternate, may be reimbursed from the assets of the~~
2472 ~~fund for expenses incurred by him or her as a member, or~~
2473 ~~alternate member, of the board and for committee work, but he or~~
2474 ~~she may not otherwise be compensated by the fund for his or her~~
2475 ~~service as a board member or alternate.~~

2476 2. There shall be no liability on the part of, and no cause
2477 of action of any nature shall arise against, the fund or its
2478 agents or employees, professional advisers or consultants, the
2479 Chief Financial Officer or his or her designee ~~members of the~~
2480 ~~board of governors or their alternates~~, or the Department of
2481 Financial Services or the Office of Insurance Regulation of the
2482 Financial Services Commission or their representatives for any
2483 action taken by them in the performance of their powers and
2484 duties pursuant to this section.

2485 (c) *Powers of the fund.*—The fund has the power to:

2486 1. Sue and be sued, and appear and defend, in all actions
2487 and proceedings in its name to the same extent as a natural
2488 person.

2489 2. Adopt, change, amend, and repeal a plan of operation,
2490 not inconsistent with law, for the regulation and administration
2491 of the affairs of the fund. The plan and any changes thereto
2492 shall be filed with the Office of Insurance Regulation of the
2493 Financial Services Commission and are all subject to its
2494 approval before implementation by the fund. All fund members,

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2495 board members, and employees shall comply with the plan of
2496 operation.

2497 3. Have and exercise all powers necessary or convenient to
2498 effect any or all of the purposes for which the fund is created.

2499 4. Enter into such contracts as are necessary or proper to
2500 carry out the provisions and purposes of this section.

2501 5. Employ or retain such persons as are necessary to
2502 perform the administrative and financial transactions and
2503 responsibilities of the fund and to perform other necessary or
2504 proper functions unless prohibited by law.

2505 6. Take such legal action as may be necessary to avoid
2506 payment of improper claims.

2507 7. Indemnify any ~~employee, agent, member of the board of~~
2508 ~~governors or his or her alternate, or~~ person acting on behalf of
2509 the fund in an official capacity, for expenses, including
2510 attorney's fees, judgments, fines, and amounts paid in
2511 settlement actually and reasonably incurred by him or her in
2512 connection with any action, suit, or proceeding, including any
2513 appeal thereof, arising out of his or her capacity in acting on
2514 behalf of the fund, if he or she acted in good faith and in a
2515 manner he or she reasonably believed to be in, or not opposed
2516 to, the best interests of the fund and, with respect to any
2517 criminal action or proceeding, he or she had reasonable cause to
2518 believe his or her conduct was lawful.

2519 (e) *Fund accounting and audit.*—

2520 1. Money shall be withdrawn from the fund only upon a
2521 voucher as authorized by the Chief Financial Officer or his or
2522 her designee ~~board of governors~~.

2523 2. All books, records, and audits of the fund shall be open

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2524 for reasonable inspection to the general public, except that a
2525 claim file in possession of the fund, fund members, and their
2526 insurers is confidential and exempt from the provisions of s.
2527 119.07(1) and s. 24(a), Art. I of the State Constitution until
2528 termination of litigation or settlement of the claim, although
2529 medical records and other portions of the claim file may remain
2530 confidential and exempt as otherwise provided by law. Any book,
2531 record, document, audit, or asset acquired by, prepared for, or
2532 paid for by the fund is subject to the authority of the Chief
2533 Financial Officer or his or her designee ~~board of governors~~,
2534 which shall be responsible therefor.

2535 3. Persons authorized to receive deposits, issue vouchers,
2536 or withdraw or otherwise disburse any fund moneys shall post a
2537 blanket fidelity bond in an amount reasonably sufficient to
2538 protect fund assets. The cost of such bond shall be paid from
2539 the fund.

2540 4. Annually, the fund shall furnish, upon request, audited
2541 financial reports to any fund participant and to the Office of
2542 Insurance Regulation and the Joint Legislative Auditing
2543 Committee. The reports shall be prepared in accordance with
2544 accepted accounting procedures and shall include income and such
2545 other information as may be required by the Office of Insurance
2546 Regulation or the Joint Legislative Auditing Committee.

2547 5. Any money held in the fund shall be invested in
2548 interest-bearing investments ~~by the board of governors of the~~
2549 ~~fund as administrator~~. However, in no case may any such money be
2550 invested in the stock of any insurer participating in the Joint
2551 Underwriting Association authorized by s. 627.351(4) or in the
2552 parent company of, or company owning a controlling interest in,

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2553 such insurer. All income derived from such investments shall be
2554 credited to the fund.

2555 6. Any health care provider participating in the fund may
2556 withdraw from such participation only at the end of a fiscal
2557 year; however, such health care provider shall remain subject to
2558 any assessment or any refund pertaining to any year in which
2559 such member participated in the fund.

2560 (i) Dissolution of the fund.—The fund shall operate subject
2561 to the supervision of the Chief Financial Officer or his or her
2562 designee, pursuant to the policies and procedures and under the
2563 auspices of the Department of Financial Services, Division of
2564 Rehabilitation and Liquidation, until the department executes a
2565 legal dissolution of the fund on or before December 31, 2023.
2566 Before the legal dissolution of the fund, the Department of
2567 Financial Services must:

2568 1. Obtain all existing records and retain necessary records
2569 of the fund pursuant to law.

2570 2. Identify all remaining property held by the fund and
2571 attempt to return such property to its owners and, for property
2572 that cannot be returned to the owner, transfer such property to
2573 the Department of Financial Services, Division of Unclaimed
2574 Property.

2575 3. Make a final accounting of the finances of the fund.

2576 4. Ensure that the fund has met all its obligations
2577 pursuant to structured settlements, annuities, or other
2578 instruments established to pay covered claims, and, if the fund
2579 has not done so, attempt to meet such obligations before final
2580 and complete dissolution of the fund.

2581 5. Sell or otherwise dispose of all physical assets of the

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2582 fund.

2583 6. Execute a legal dissolution of the fund.

2584 7. Transfer any remaining money or assets of the fund to
2585 the Chief Financial Officer for deposit in the General Revenue
2586 Fund.

2587 (4) REPEAL.—This section is repealed January 1, 2024.

2588 Section 67. Paragraph (b) of subsection (1) of section
2589 945.6041, Florida Statutes, is amended to read:

2590 945.6041 Inmate medical services.—

2591 (1) As used in this section, the term:

2592 (b) "Health care provider" means:

2593 1. A hospital licensed under chapter 395.

2594 2. A physician or physician assistant licensed under
2595 chapter 458.

2596 3. An osteopathic physician or physician assistant licensed
2597 under chapter 459.

2598 4. A podiatric physician licensed under chapter 461.

2599 5. A health maintenance organization certificated under
2600 part I of chapter 641.

2601 6. An ambulatory surgical center licensed under chapter
2602 395.

2603 7. A professional association, partnership, corporation,
2604 joint venture, or other association established by the
2605 individuals set forth in subparagraphs 2., 3., and 4. for
2606 professional activity.

2607 8. Other medical facility.

2608 a. As used in this subparagraph, the term "other medical
2609 facility" means:

2610 (I) A facility the primary purpose of which is to provide

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2611 human medical diagnostic services, or a facility providing
2612 nonsurgical human medical treatment which discharges patients on
2613 the same working day that the patients are admitted; and

2614 (II) A facility that is not part of a hospital.

2615 b. The term does not include a facility existing for the
2616 primary purpose of performing terminations of pregnancy, or an
2617 office maintained by a physician or dentist for the practice of
2618 medicine ~~has the same meaning as provided in s. 766.105.~~

2619 Section 68. Paragraph (a) of subsection (1) of section
2620 985.6441, Florida Statutes, is amended to read:

2621 985.6441 Health care services.—

2622 (1) As used in this section, the term:

2623 (a) "Health care provider" means:

2624 1. A hospital licensed under chapter 395.

2625 2. A physician or physician assistant licensed under
2626 chapter 458.

2627 3. An osteopathic physician or physician assistant licensed
2628 under chapter 459.

2629 4. A podiatric physician licensed under chapter 461.

2630 5. A health maintenance organization certificated under
2631 part I of chapter 641.

2632 6. An ambulatory surgical center licensed under chapter
2633 395.

2634 7. A professional association, partnership, corporation,
2635 joint venture, or other association established by the
2636 individuals set forth in subparagraphs 2., 3., and 4. for
2637 professional activity.

2638 8. Other medical facility.

2639 a. As used in this subparagraph, the term "other medical

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2640 facility” means:

2641 (I) A facility the primary purpose of which is to provide
2642 human medical diagnostic services, or a facility providing
2643 nonsurgical human medical treatment which discharges patients on
2644 the same working day that the patients are admitted; and

2645 (II) A facility that is not part of a hospital.

2646 b. The term does not include a facility existing for the
2647 primary purpose of performing terminations of pregnancy, or an
2648 office maintained by a physician or dentist for the practice of
2649 medicine ~~has the same meaning as provided in s. 766.105.~~

2650 Section 69. All powers, duties, functions, records,
2651 offices, personnel, associated administrative support positions,
2652 property, pending issues, existing contracts, administrative
2653 authority, and administrative rules relating to the Stop Inmate
2654 Fraud Program within the Department of Financial Services are
2655 transferred by a type two transfer as defined in s. 20.06(2),
2656 Florida Statutes, to the Department of Economic Opportunity.

2657 Section 70. Except as otherwise expressly provided in this
2658 act, this act shall take effect July 1, 2022.