

1                   A bill to be entitled  
2           An act relating to insurer accountability to insureds;  
3           amending s. 626.854, F.S.; requiring public adjusters,  
4           public adjuster apprentices, and public adjusting  
5           firms to respond to requests for claims' statuses  
6           within a specified timeframe; creating s. 627.4823,  
7           F.S.; providing definitions; providing reporting  
8           requirements relating to universal life insurance  
9           policies; providing applicability; amending s.  
10          627.6515, F.S.; providing applicability of specified  
11          provisions relating to group health insurance  
12          policies; creating s. 627.7293, F.S.; requiring  
13          certain motor vehicle insurers that provide towing and  
14          labor coverage to disclose certain language when a  
15          towing or labor claim is made; requiring such insurers  
16          to obtain express consent from claimants before  
17          submission of claims; providing applicability; creating  
18          s. 627.7431, F.S.; providing definitions; requiring  
19          motor vehicle insurers to pay or to deny or partially  
20          deny first-party claims under private passenger motor  
21          vehicle insurance policies within a specified  
22          timeframe; providing exceptions; requiring written  
23          explanations for the insurers' decisions relating to  
24          claims payments; providing for interest on claims;  
25          prohibiting specified provisions on claims and

26 interest from being waived, voided, or nullified;  
 27 providing circumstances under which requirements for  
 28 claims and interest on claims are tolled; providing  
 29 applicability; providing an effective date.

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

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33 **Section 1. Subsection (24) is added to section 626.854,**  
 34 **Florida Statutes, to read:**

35 626.854 "Public adjuster" defined; prohibitions.—The  
 36 Legislature finds that it is necessary for the protection of the  
 37 public to regulate public insurance adjusters and to prevent the  
 38 unauthorized practice of law.

39 (24) A public adjuster, public adjuster apprentice, or  
 40 public adjusting firm shall respond with specific information to  
 41 a written or electronic request for a claim's status from an  
 42 insured or claimant or his or her designated representative  
 43 within 14 days after receipt of the request and shall document  
 44 the file accordingly.

45 **Section 2. Section 627.4823, Florida Statutes, is created**  
 46 **to read:**

47 627.4823 Universal life insurance policies.—

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

49 (a) "Cash surrender value" means the net cash surrender  
 50 value, plus any outstanding amounts as policy loans.

51        (b) "Fixed-premium universal life insurance policy" means  
52 a universal life insurance policy other than a flexible-premium  
53 universal life insurance policy.

54        (c) "Flexible-premium universal life insurance policy"  
55 means a universal life insurance policy that allows the  
56 policyowner to vary, independently of each other, the amount of  
57 timing of one or more premium payments or the amount of  
58 insurance.

59        (d) "Net cash surrender value" means the maximum amount  
60 payable to the policyowner upon surrender.

61        (e) "Policy value" means the value of any individual life  
62 insurance policy, rider, group master policy, or individual  
63 certificate, under the provisions of which separately identified  
64 interest credits, other than in connection with dividend  
65 accumulations, premium deposit funds, or other supplementary  
66 accounts, and mortality and expense charges are made to the  
67 policy. A universal life insurance policy may provide for other  
68 credits and charges, such as charges for the cost of benefits  
69 provided by a rider.

70        (f) "Universal life insurance policy" means any individual  
71 life insurance policy, rider, group master policy, or individual  
72 certificate, under the provisions of which separately identified  
73 interest credits and mortality and expense charges are made to  
74 the policy. The policy, rider, or certificate does not apply to  
75 policies, riders, group master policies, or individual

76 certificates in connection with dividend accumulations, premium  
77 deposit funds, or other supplementary accounts. A universal life  
78 insurance policy may provide for other credits and charges, such  
79 as charges for the cost of benefits provided by a rider.

80 (2) (a) A universal life insurance policy issued in this  
81 state must provide that the policyowner will be sent without  
82 charge, at least annually, a report that will serve to keep the  
83 policyowner advised of the status of the policy. The end date of  
84 the current reporting period may not be more than 3 months  
85 before the date of the mailing of the report.

86 (b) The report must include all of the following:

87 1. The beginning and end dates of the current reporting  
88 period.

89 2. The policy value at the end of the previous reporting  
90 period and at the end of the current reporting period.

91 3. The total amounts, identified by each type, which have  
92 been credited or debited to the policy value during the current  
93 reporting period.

94 4. The current death benefit at the end of the current  
95 reporting period on each life covered by the policy.

96 5. The net cash surrender value of the policy as of the  
97 end of the current reporting period.

98 6. The amount of outstanding loans, if any, as of the end  
99 of the current reporting period.

100 7. For a fixed-premium universal life insurance policy,

101 if, assuming the guaranteed interest, mortality and expense  
102 loads, and continued scheduled premium payment, the policy's net  
103 cash surrender value is such that it would not maintain  
104 insurance in force until the end of the next reporting period, a  
105 notice to this effect in the report.

106 8. For a flexible-premium universal life insurance policy,  
107 if, assuming the guaranteed interest and the mortality and  
108 expense loads, the policy's net cash surrender value will not  
109 maintain insurance in force until the end of the next reporting  
110 period unless further premium payments are made, a notice to  
111 this effect in the report.

112 9. For a fixed-premium or flexible-premium universal life  
113 insurance policy, if, assuming the guaranteed interest and the  
114 mortality and expense loads, the policy's net cash surrender  
115 value will not maintain insurance in force until the maturity of  
116 the contract, the projected date on which policy values will be  
117 insufficient to continue coverage in force.

118 (3) This section applies to all universal life insurance  
119 policies except variable contracts as defined in s. 627.8015.

120 **Section 3. Paragraph (c) of subsection (2) of section**  
121 **627.6515, Florida Statutes, is amended to read:**

122 627.6515 Out-of-state groups.—

123 (2) Except as otherwise provided in this part, this part  
124 does not apply to a group health insurance policy issued or  
125 delivered outside this state under which a resident of this

126 state is provided coverage if:

127 (c) The policy provides the benefits specified in ss.  
 128 627.419, 627.6562, 627.6574, 627.6575, 627.6579, 627.6612,  
 129 627.66121, 627.66122, 627.6613, 627.667, 627.6675, 627.6691, and  
 130 627.66911, and complies with the requirements of s. 627.66996.

131 **Section 4. Section 627.7293, Florida Statutes, is created**  
 132 **to read:**

133 627.7293 Towing and labor mandatory disclosure.-

134 (1) A motor vehicle insurer that provides towing and labor  
 135 coverage as a filed claim must disclose substantially the  
 136 following language on any web-based or electronic platform  
 137 through which a towing or labor claim is made or verbally state  
 138 such language to the claimant if the claim is being made over  
 139 the telephone:

141 "YOUR MOTOR VEHICLE INSURANCE POLICY PROVIDES COVERAGE FOR  
 142 TOWING AND LABOR. USE OF THIS COVERAGE REQUIRES A FILING OF A  
 143 CLAIM. SUCH CLAIM FILING WILL REMAIN IN YOUR CLAIMS HISTORY FOR  
 144 USE OF FUTURE UNDERWRITING OF ANY INITIAL OR RENEWAL OFFER MADE  
 145 BY THIS INSURER OR ANY OTHER INSURER."

147 (2) The motor vehicle insurer must obtain express consent  
 148 from the claimant before the submission of a claim.

149 (3) The disclosure requirement under subsection (1) does  
 150 not apply if the towing and labor claim is part of a claim for

151 damages resulting from a crash.

152 **Section 5. Section 627.7431, Florida Statutes, is created**  
153 **to read:**

154 627.7431 Payment of first-party claims under private  
155 passenger motor vehicle insurance policies.-

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

157 (a) "Claim" means any first-party claim made under an  
158 insurance policy providing coverage for a private passenger  
159 motor vehicle, as defined in s. 627.732(3)(a).

160 (b) "Factors beyond the control of the insurer" means:

161 1. Any of the following events which is the basis for the  
162 office issuing an order finding that such event renders all or  
163 specified motor vehicle insurers reasonably unable to meet the  
164 requirements of this section in specified locations and ordering  
165 that such insurers have additional time as specified by the  
166 office to comply with the requirements of this section:

167 a. A state of emergency declared by the Governor under s.  
168 252.36.

169 b. A breach of security that must be reported under s.  
170 501.171(3).

171 c. An information technology issue.

172 2. An action by the policyholder or the policyholder's  
173 representative which constitutes fraud, lack of cooperation, or  
174 intentional misrepresentation regarding the claim for which  
175 benefits are owed when such action reasonably prevents the

176 insurer from complying with any requirement of this section.

177 3. An action by any repair company which constitutes  
178 fraud, lack of cooperation, or intentional misrepresentation  
179 regarding the claim for which benefits are owed when such action  
180 reasonably prevents the insurer from complying with any  
181 requirement of this section.

182 4. Inaccessibility to or delay in the arrival of parts  
183 necessary for the repair of the vehicle.

184 (2) (a) Within 60 days after a motor vehicle insurer  
185 receives notice of an initial, reopened, or supplemental first-  
186 party physical damage insurance claim from a policyholder, the  
187 insurer shall pay or deny the claim or a portion of the claim  
188 unless the failure to pay or deny is caused by factors beyond  
189 the control of the insurer. In any of the events described in  
190 subparagraph (1) (b) 1., the office may extend the period for  
191 payment or denial of a claim up to 30 additional days.

192 (b) The insurer shall provide a reasonable explanation in  
193 writing to the policyholder of the basis in the insurance  
194 policy, in relation to the facts or applicable law, for the  
195 payment, denial, or partial denial of a claim. If the insurer's  
196 claim payment is less than specified in any insurer's detailed  
197 estimate of the amount of the loss, the insurer must provide a  
198 reasonable explanation in writing of the difference to the  
199 policyholder. Any payment of an initial or supplemental claim or  
200 portion of such claim made 60 days after the insurer receives



201 notice of the claim, or made after the expiration of any  
202 additional timeframe to pay or deny a claim or a portion of a  
203 claim authorized pursuant to an order of the office finding  
204 factors beyond the control of the insurer, whichever is later,  
205 bears interest at the rate set forth in s. 55.03. Interest  
206 begins to accrue from the date the insurer receives notice of  
207 the claim.

208 (c) The provisions of this subsection may not be waived,  
209 voided, or nullified by the terms of the insurance policy. If  
210 there is a right to prejudgment interest, the insured must  
211 select whether to receive prejudgment interest or interest under  
212 this subsection. Interest is payable when the claim or a portion  
213 of the claim is paid. Failure to comply with this subsection  
214 constitutes a violation of the Florida Insurance Code. However,  
215 failure to comply with this subsection does not form the sole  
216 basis for a private cause of action.

217 (3) The requirements of this section are tolled:

218 (a) During the pendency of any mediation proceeding under  
219 s. 627.745 or any alternative dispute resolution proceeding  
220 provided for in the insurance contract. The tolling period ends  
221 upon the end of the mediation or alternative dispute resolution  
222 proceeding.

223 (b) Upon the failure of a policyholder or a representative  
224 of the policyholder to provide material claims information  
225 requested by the insurer within 10 days after the request was

226 received. The tolling period ends upon the insurer's receipt of  
 227 the requested information. Tolling under this paragraph applies  
 228 only to requests sent by the insurer to the policyholder or a  
 229 representative of the policyholder at least 15 days before the  
 230 insurer is required to pay or deny the claim or a portion of the  
 231 claim under subsection (2).

232 (4) This section does not apply to any of the following:

233 (a) An insurance policy providing coverage for a  
 234 commercial motor vehicle, as defined in s. 627.732(3)(b).

235 (b) Any portion of a claim covered if the portion of the  
 236 claim is based on coverage for:

237 1. Personal injury protection.

238 2. Property damage liability.

239 3. Bodily injury.

240 4. Uninsured motorists or underinsured motorists.

241 5. Medical payments.

242 **Section 6.** This act shall take effect July 1, 2025.