By Senator Bean

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A bill to be entitled An act relating to insurance claims; amending s. 626.601, F.S.; adding mediators and neutral evaluators to the list of individuals or entities that the Department of Financial Services or the Office of Insurance Regulation may investigate for alleged improper conduct; amending s. 627.3518, F.S.; conforming a cross-reference; amending s. 627.409, F.S.; providing that a claim for residential property insurance cannot be denied based on certain credit information; amending s. 627.4133, F.S.; providing that a policy or contract be cancelled based on certain credit information; amending s. 627.422, F.S.; providing for the assignment of property insurance policy benefits; specifying requirements for the assignment of post-loss benefits in a valid agreement for services; amending s. 627.7015, F.S.; revising the rule requirements relating to the property insurance mediation program administered by the department; creating s. 627.70151, F.S.; providing grounds for challenging an umpire's impartiality in estimating the amount of a property loss; amending s. 627.706, F.S.; redefining the term "neutral evaluator"; amending s. 627.7074, F.S.; specifying grounds for denying, suspending, or revoking approval of a neutral evaluator; creating s. 627.7142, F.S.; establishing a Claims Bill of Rights for residential property insurance policyholders; providing that such bill of rights does not provide a cause of action; creating s.

627.715, F.S.; defining terms; providing requirements for emergency mitigation repair agreements; requiring an emergency mitigation contractor to be appropriately certified or to possess a contracting license; amending s. 627.745, F.S.; revising qualifications for mediators of personal injury claims; providing grounds for denying, suspending, or revoking the application or approval of a mediator; providing an effective date.

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

Section 1. Section 626.601, Florida Statutes, is amended to read:

626.601 Improper conduct; <u>investigation</u> inquiry; <u>fingerprinting</u>.—

(1) The department or office may, upon its own motion or upon a written complaint signed by an any interested person and filed with the department or office, inquire into the any alleged improper conduct of an approved, certified, or any licensed insurance agency, agent, adjuster, service representative, managing general agent, customer representative, title insurance agent, title insurance agency, mediator, neutral evaluator, continuing education course provider, instructor, school official, or monitor group under this code. The department or office may thereafter initiate an investigation of any such individual or entity licensee if it has reasonable

violated any provision of the insurance code. During the course

cause to believe that the individual or entity <del>licensee</del> has

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of its investigation, the department or office shall contact the <a href="individual or entity">individual or entity</a> licensee being investigated unless it determines that contacting such individual or entity person could jeopardize the successful completion of the investigation or cause injury to the public.

- (2) In the investigation by the department or office of the alleged misconduct, the <u>individual or entity licensee</u> shall, <u>if</u> whenever so required by the department or office, <u>open the individual's or entity's cause his or her</u> books and records to be open for inspection for the purpose of such inquiries.
- (3) The Complaints against an individual or entity any licensee may be informally alleged and are not required to include language need not be in any such language as is necessary to charge a crime on an indictment or information.
- (4) The expense for any hearings or investigations conducted pursuant to under this section law, as well as the fees and mileage of witnesses, may be paid out of the appropriate fund.
- (5) If the department or office, after investigation, the department or office has reason to believe that an individual a licensee may have been found guilty of or pleaded guilty or nolo contendere to a felony or a crime related to the business of insurance in this or any other state or jurisdiction, the department or office may require the individual licensee to file with the department or office a complete set of his or her fingerprints, which shall be accompanied by the fingerprint processing fee specified set forth in s. 624.501. The fingerprints must shall be taken by an authorized law enforcement agency or other department-approved entity.

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(6) The complaint and any information obtained pursuant to the investigation by the department or office are confidential and are exempt from the provisions of s. 119.07, unless the department or office files a formal administrative complaint, emergency order, or consent order against the individual or entity licensee. Nothing in This subsection does not shall be construed to prevent the department or office from disclosing the complaint or such information as it deems necessary to conduct the investigation, to update the complainant as to the status and outcome of the complaint, or to share such information with a any law enforcement agency or other regulatory body.

Section 2. Subsection (9) of section 627.3518, Florida Statutes, is amended to read:

- 627.3518 Citizens Property Insurance Corporation policyholder eligibility clearinghouse program.—The purpose of this section is to provide a framework for the corporation to implement a clearinghouse program by January 1, 2014.
- (9) The 45-day notice of nonrenewal requirement set forth in  $\underline{s. 627.4133(2)(b)5.b.}$   $\underline{s. 627.4133(2)(b)4.b.}$  applies when a policy is nonrenewed by the corporation because the risk has received an offer of coverage pursuant to this section which renders the risk ineligible for coverage by the corporation.

Section 3. Section 627.409, Florida Statutes, is amended to read:

- 627.409 Representations in applications; warranties.-
- (1) Any statement or description made by or on behalf of an insured or annuitant in an application for an insurance policy or annuity contract, or in negotiations for a policy or

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contract, is a representation and <del>is</del> not a warranty. <u>Except as</u> <u>provided in subsection (3),</u> a misrepresentation, omission, concealment of fact, or incorrect statement may prevent recovery under the contract or policy only if any of the following apply:

- (a) The misrepresentation, omission, concealment, or statement is fraudulent or is material either to the acceptance of the risk or to the hazard assumed by the insurer.
- (b) If the true facts had been known to the insurer pursuant to a policy requirement or other requirement, the insurer in good faith would not have issued the policy or contract, would not have issued it at the same premium rate, would not have issued a policy or contract in as large an amount, or would not have provided coverage with respect to the hazard resulting in the loss.
- (2) A breach or violation by the insured of  $\underline{a}$  any warranty, condition, or provision of  $\underline{a}$  any wet marine or transportation insurance policy, contract of insurance, endorsement, or application therefor does not void the policy or contract, or constitute a defense to a loss thereon, unless such breach or violation increased the hazard by any means within the control of the insured.
- (3) For residential property insurance, if a policy or contract has been in effect for more than 90 days, a claim filed by the insured cannot be denied based on credit information available in public record.
- Section 4. Paragraph (b) of subsection (2) of section 627.4133, Florida Statutes, is amended to read:
- 627.4133 Notice of cancellation, nonrenewal, or renewal premium.—

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(2) With respect to any personal lines or commercial residential property insurance policy, including, but not limited to, any homeowner's, mobile home owner's, farmowner's, condominium association, condominium unit owner's, apartment building, or other policy covering a residential structure or its contents:

- (b) The insurer shall give the first-named insured written notice of nonrenewal, cancellation, or termination at least 100 days before the effective date of the nonrenewal, cancellation, or termination. However, the insurer shall give at least 100 days' written notice, or written notice by June 1, whichever is earlier, for any nonrenewal, cancellation, or termination that would be effective between June 1 and November 30. The notice must include the reason or reasons for the nonrenewal, cancellation, or termination, except that:
- 1. The insurer shall give the first-named insured written notice of nonrenewal, cancellation, or termination at least 120 days <u>before</u> prior to the effective date of the nonrenewal, cancellation, or termination for a first-named insured whose residential structure has been insured by that insurer or an affiliated insurer for at least <u>5 years before</u> a 5-year period immediately prior to the date of the written notice.
- 2. If cancellation is for nonpayment of premium, at least 10 days' written notice of cancellation accompanied by the reason therefor must be given. As used in this subparagraph, the term "nonpayment of premium" means failure of the named insured to discharge when due her or his obligations for paying the premium in connection with the payment of premiums on a policy or an any installment of such premium, whether the premium is

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payable directly to the insurer or its agent or indirectly under a any premium finance plan or extension of credit, or failure to maintain membership in an organization if such membership is a condition precedent to insurance coverage. The term also means the failure of a financial institution to honor an insurance applicant's check after delivery to a licensed agent for payment of a premium, even if the agent has previously delivered or transferred the premium to the insurer. If a dishonored check represents the initial premium payment, the contract and all contractual obligations are void ab initio unless the nonpayment is cured within the earlier of 5 days after actual notice by certified mail is received by the applicant or 15 days after notice is sent to the applicant by certified mail or registered mail., and If the contract is void, any premium received by the insurer from a third party must be refunded to that party in full.

- 3. If such cancellation or termination occurs during the first 90 days the insurance is in force and the insurance is canceled or terminated for reasons other than nonpayment of premium, at least 20 days' written notice of cancellation or termination accompanied by the reason therefor must be given unless there has been a material misstatement or misrepresentation or  $\underline{a}$  failure to comply with the underwriting requirements established by the insurer.
- 4. After a policy or contract has been in effect for more than 90 days, the insurer may not cancel or terminate the policy or contract based on credit information available in public records.
  - 5.4. The requirement for providing written notice by June 1

of any nonrenewal that would be effective between June 1 and November 30 does not apply to the following situations, but the insurer remains subject to the requirement to provide such notice at least 100 days before the effective date of nonrenewal:

- a. A policy that is nonrenewed due to a revision in the coverage for sinkhole losses and catastrophic ground cover collapse pursuant to s. 627.706.
- b. A policy that is nonrenewed by Citizens Property Insurance Corporation, pursuant to s. 627.351(6), for a policy that has been assumed by an authorized insurer offering replacement coverage to the policyholder is exempt from the notice requirements of paragraph (a) and this paragraph. In such cases, the corporation must give the named insured written notice of nonrenewal at least 45 days before the effective date of the nonrenewal.

After the policy has been in effect for 90 days, the policy may not be canceled by the insurer unless there has been a material misstatement, a nonpayment of premium, a failure to comply with underwriting requirements established by the insurer within 90 days after the date of effectuation of coverage, or a substantial change in the risk covered by the policy, or if the cancellation is for all insureds under such policies for a given class of insureds. This paragraph does not apply to individually rated risks that have having a policy term of less than 90 days.

 $\underline{6.5.}$  Notwithstanding any other provision of law, an insurer may cancel or nonrenew a property insurance policy after at least 45 days' notice if the office finds that the early

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cancellation of some or all of the insurer's policies is necessary to protect the best interests of the public or policyholders and the office approves the insurer's plan for early cancellation or nonrenewal of some or all of its policies. The office may base such finding upon the financial condition of the insurer, lack of adequate reinsurance coverage for hurricane risk, or other relevant factors. The office may condition its finding on the consent of the insurer to be placed under administrative supervision pursuant to s. 624.81 or to the appointment of a receiver under chapter 631.

7.6. A policy covering both a home and <u>a</u> motor vehicle may be nonrenewed for any reason applicable to <del>either</del> the property or motor vehicle insurance after providing 90 days' notice.

Section 5. Section 627.422, Florida Statutes, is amended to read:

627.422 Assignment of policies.—A policy may be assignable, or not assignable, as provided by its terms.

(1) Subject to its terms relating to assignability, a any life or health insurance policy, under the terms of which the beneficiary may be changed only upon the sole request of the policyowner, may be assigned either by pledge or transfer of title, by an assignment executed by the policyowner alone and delivered to the insurer, regardless of whether or not the pledgee or assignee is the insurer. Any such assignment entitles shall entitle the insurer to deal with the assignee as the owner or pledgee of the policy in accordance with the terms of the assignment, until the insurer has received at its home office written notice of termination of the assignment or pledge or written notice by or on behalf of some other person claiming

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some interest in the policy in conflict with the assignment.

- (2) The assignment of post-loss benefits is restricted for a residential property insurance policy. An agreement purporting to assign post-loss benefits for repair or replacement is valid only if the agreement:
- (a) Requires the assignee to notify the insurance company within 48 hours of the assignment. If the contact information for the insurer is unavailable for the first 48 hours, the assignee shall contact the company as soon as practicable;
- (b) Limits the assignment to the contracted work to be performed and is restricted to claims for damage to structures covered under the policy;
- (c) Specifies the estimated scope and price of the work before it is performed;
- (d) Prohibits the assignee from charging the policyowner for any portion of the repair or replacement beyond the applicable deductible contained in the insurance policy;
- (e) Prohibits a person performing any portion of the repair or replacement on behalf of the assignee from charging the policyowner;
- (f) Prohibits the assignee from retaining insurance proceeds that are earmarked by the insurer for payment of work to be performed by vendors other than the assignee; and
- (g) Requires the assignee to guarantee that the work performed for the loss event conforms to the most recent, accepted industry standards.
- Section 6. Paragraph (b) of subsection (4) of section 627.7015, Florida Statutes, is amended to read:
  - 627.7015 Alternative procedure for resolution of disputed

property insurance claims.-

(4) The department shall adopt by rule a property insurance mediation program to be administered by the department or its designee. The department may also adopt special rules which are applicable in cases of an emergency within the state. The rules shall be modeled after practices and procedures set forth in mediation rules of procedure adopted by the Supreme Court. The rules shall provide for:

(b) Qualifications, denial of application, suspension, revocation, and other penalties for of mediators as provided in s. 627.745 and in the Florida Rules for of Certified and Court-Appointed Court Appointed Mediators, and for such other individuals as are qualified by education, training, or experience as the department determines to be appropriate.

Section 7. Section 627.70151, Florida Statutes, is created to read:

627.70151 Appraisal; conflicts of interest.—An insurer that offers residential coverage as defined in s. 627.4025, or a policyholder that uses an appraisal clause in a property insurance contract to establish a process for using an impartial umpire to estimate or evaluate the amount of loss, may challenge an umpire's impartiality and disqualify the proposed umpire only if:

- (1) A familial relationship within the third degree exists between the umpire and a party or a representative of a party;
- (2) The umpire has previously represented a party or a representative of a party in a professional capacity in the same or a substantially related matter;
  - (3) The umpire has represented another person in a

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professional capacity on the same or a substantially related
matter that includes the claim or the same property, and the
other person's interests are materially adverse to the interests
of a party; or

- (4) The umpire has worked as an employer or employee of a party within the preceding 5 years.
- Section 8. Paragraph (c) of subsection (2) of section 627.706, Florida Statutes, is amended to read:
- 627.706 Sinkhole insurance; catastrophic ground cover collapse; definitions.—
- (2) As used in ss. 627.706-627.7074, and as used in connection with any policy providing coverage for a catastrophic ground cover collapse or for sinkhole losses, the term:
- (c) "Neutral evaluator" means a professional engineer or a professional geologist who has completed a course of study in alternative dispute resolution designed or approved by the department for use in the neutral evaluation process, and who is determined by the department to be fair and impartial, and who is not otherwise ineligible for certification under s. 627.7074.
- Section 9. Subsections (7) and (18) of section 627.7074, Florida Statutes, are amended to read:
- 627.7074 Alternative procedure for resolution of disputed sinkhole insurance claims.—
- (7) Upon receipt of a request for neutral evaluation, the department shall provide the parties a list of certified neutral evaluators. The department shall allow the parties to submit requests to disqualify evaluators on the list for cause.
- (a) The department shall disqualify neutral evaluators for cause based only on any of the following grounds:

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1. A familial relationship  $\underline{\text{within the third degree}}$  exists between the neutral evaluator and either party or a representative of either party  $\underline{\text{within the third degree}}$ .

- 2. The proposed neutral evaluator has, in a professional capacity, previously represented either party or a representative of either party, in the same or a substantially related matter.
- 3. The proposed neutral evaluator has, in a professional capacity, represented another person in the same or a substantially related matter and that person's interests are materially adverse to the interests of the parties. The term "substantially related matter" means participation by the neutral evaluator on the same claim, property, or adjacent property.
- 4. The proposed neutral evaluator has, within the preceding 5 years, worked as an employer or employee of any party to the case.
- (b) The department shall deny an application for, or suspend or revoke its approval of, a neutral evaluator if the department finds that any of the following grounds exist:
- 1. Lack of one or more of the qualifications specified in this section for approval or certification.
- 2. Material misstatement, misrepresentation, or fraud in obtaining or attempting to obtain approval or certification.
- 3. Demonstrated lack of fitness or trustworthiness to act as a neutral evaluator.
- 4. Fraudulent or dishonest practices in the conduct of an evaluation or in the conduct of financial services business.
  - 5. Violation of any provision of this code or of a lawful

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order or rule of the department, or aiding, instructing, or encouraging another party in committing such a violation.

(c) (b) The parties shall appoint a neutral evaluator from the department list and promptly inform the department. If the parties cannot agree to a neutral evaluator within 14 business days, the department shall appoint a neutral evaluator from the list of certified neutral evaluators. The department shall allow each party to disqualify two neutral evaluators without cause. Upon selection or appointment, the department shall promptly refer the request to the neutral evaluator.

(d) (e) Within 14 business days after the referral, the neutral evaluator shall notify the policyholder and the insurer of the date, time, and place of the neutral evaluation conference. The conference may be held by telephone, if feasible and desirable. The neutral evaluator shall make reasonable efforts to hold the conference within 90 days after the receipt of the request by the department. Failure of the neutral evaluator to hold the conference within 90 days does not invalidate either party's right to neutral evaluation or to a neutral evaluation conference held outside this timeframe.

(18) The department shall adopt rules of procedure for the neutral evaluation process and for certifying, denying certification, suspending certification, and revoking the certification of a neutral evaluator.

Section 10. Section 627.7142, Florida Statutes, is created to read:

627.7142 Homeowner Claims Bill of Rights.—An insurer issuing a residential property insurance policy in this state must provide a Claims Bill of Rights to a policyholder within 14

calendar days after receiving a communication with respect to a claim, unless the claim follows an event that is the subject of a declaration of a state emergency by the Governor. The purpose of the bill of rights is to explain, in simple, nontechnical terms, the rights of a residential property insurance policyholder who files a claim of loss. The Claims Bill of Rights is specific to the claims process and does not represent all of a policyholder's rights under Florida law regarding the insurance policy. The Claims Bill of Rights does not create a civil cause of action by any individual policyholder or class of policyholders against an individual insurer. The Claims Bill of Rights shall state:

## HOMEOWNER CLAIMS

## BILL OF RIGHTS

This Bill of Rights is specific to the claims process and does not represent all of your rights under Florida law regarding your policy. There are also exceptions to the stated timelines when conditions are beyond your insurance company's control. This document does not create a civil cause of action by an individual policyholder, or a class of policyholders, against an individual insurer.

## YOU HAVE THE RIGHT TO:

1. Receive from your insurance company an acknowledgment of your reported claim within 14 days after the time you communicated the claim, along with necessary claim forms, including a proof-of-loss form,

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instructions, and appropriate, up-to-date contact information.

- 2. Upon written request, receive from your insurance company within 30 days after you have completed a proof-of-loss statement to your insurance company, confirmation that your claim is covered in full, partially covered, or denied, or receive a written statement that your claim is being investigated.
- 3. Within 90 days, receive full settlement payment for your claim or payment of the undisputed portion of your claim, or your insurance company's denial of your claim.
- 4. Free mediation of your disputed claim by the Division of Consumer Services, under most circumstances and subject to certain restrictions.
- 5. Neutral evaluation of your disputed claim, if your claim is for damage caused by a sinkhole and is covered by your policy.
- 6. Contact the Florida Department of Financial
  Services Division of Consumer Services' toll-free
  helpline for assistance with any insurance claim or
  questions pertaining to the handling of your claim.
  You can reach the Helpline by phone at...toll free
  phone number..., or you can seek assistance online at
  the Florida Department of Financial Services Division
  of Consumer Services' website at...website address....

464 YOU ARE ADVISED TO:

1. Contact your insurance company before entering into any contract for repairs to confirm any managed repair policy provisions or optional preferred vendors.

- 2. Make and document emergency repairs that are necessary to prevent further damage. Keep the damaged property, if feasible, keep all receipts, and take photographs of damage before and after any repairs.
- 3. Carefully read any contract that requires you to pay out-of-pocket expenses or a fee that is based on a percentage of the insurance proceeds that you will receive for repairing or replacing your property.
- 4. Confirm that the contractor you choose is licensed to do business in Florida. You can verify a contractor's license and check to see if there are any complaints against him or her by calling the Florida Department of Business and Professional Regulation.
  You should also ask the contractor for references from previous work.
- 5. Require all contractors to provide proof of insurance before beginning repairs.
- 6. Take precautions if the damage requires you to leave your home, including securing your property and turning off your gas, water, and electricity, and contacting your insurance company and provide a phone number where you can be reached.

Section 11. Section 627.715, Florida Statutes, is created to read:

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627.715 Emergency mitigation services; agreements.-

- (1) As used in this section, the term "emergency mitigation services" means the delivery of goods or services that are needed to mitigate damage caused by fire, water, or catastrophic events when delay may exacerbate the damage to the covered property. Services include the removal of contents, removal of water or other contaminants, cleaning, sanitizing, incidental demolition, or other treatment, including preventive activities.
- (2) For residential property insurance, an agreement for emergency mitigation services to which insurance proceeds may be applied is valid only if:
- (a) The agreement specifies in writing the estimated scope and price of the work before it is performed;
- (b) Any change from the original estimated scope and price of the work is preapproved by the policyholder; and
- (c) The work is performed by an individual or company possessing a valid certification consistent with the most recent Standard and Reference Guide for Professional Water Damage Restoration, as developed by the Institute of Inspection, Cleaning and Restoration Certification and approved by the American National Standards Institute, or by a company that possesses a valid Division I license under chapter 489, which is providing services within the scope of that license. A company is considered to be certified for the purposes of this paragraph if the company representative who possesses a valid certification personally supervises the emergency mitigation services performed.
- Section 12. Present subsections (3) through (5) of section 627.745, Florida Statutes, are amended, and a new subsection (4)

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is added to that section, to read:

- 627.745 Mediation of claims.
- (3) (a) The department shall approve mediators to conduct mediations pursuant to this section.
- (a) All mediators must file an application under oath for approval as a mediator.
- (b) To qualify for approval as a mediator, an individual  $\frac{1}{2}$  person must meet one of the following qualifications:
- 1. Possess active certification by the Florida Supreme

  Court as a circuit court mediator. A certified circuit court

  mediator in a lapsed, suspended, sanctioned, or decertified

  status is not eligible to participate in the mediation program a

  masters or doctorate degree in psychology, counseling, business,

  accounting, or economics, be a member of The Florida Bar, be

  licensed as a certified public accountant, or demonstrate that

  the applicant for approval has been actively engaged as a

  qualified mediator for at least 4 years prior to July 1, 1990.
- 2. Be an approved department mediator as of July 1, 2014, and have conducted at least one mediation on behalf of the department within the 4 years immediately preceding that the date. the application for approval is filed with the department, have completed a minimum of a 40-hour training program approved by the department and successfully passed a final examination included in the training program and approved by the department. The training program shall include and address all of the following:
  - a. Mediation theory.
  - b. Mediation process and techniques.
  - c. Standards of conduct for mediators.

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d. Conflict management and intervention skills.

- e. Insurance nomenclature.
- (4) The department shall deny an application, or suspend or revoke its approval of a mediator, or the certification of a neutral evaluator to serve as a mediator, if the department finds that any of the following grounds exists:
- (a) Lack of one or more of the qualifications specified in this section for approval or certification.
- (b) Material misstatement, misrepresentation, or fraud in obtaining or attempting to obtain approval or certification.
- (c) Demonstrated lack of fitness or trustworthiness to act as a mediator or neutral evaluator.
- (d) Fraudulent or dishonest practices in the conduct of mediation or neutral evaluation or in the conduct of financial services business.
- (e) Violation of this code, of a lawful order or rule of the department, or of the Florida Rules for Certified and Court-Appointed Mediators, or the aiding, instructing, or encouraging of another to commit such violation.
- $\underline{(5)}$  (4) The department <u>shall</u> <u>must</u> adopt rules <u>to administer</u> this section, including rules of procedure for claims mediation, taking into consideration a system that <u>which</u>:
  - (a) Is fair.
  - (b) Promotes settlement.
  - (c) Avoids delay.
  - (d) Is nonadversarial.
  - (e) Uses a framework for modern mediating technique.
  - (f) Controls costs and expenses of mediation.
  - (6) Disclosures and information divulged in the

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mediation process are not admissible in any subsequent action or proceeding relating to the claim or to the cause of action giving rise to the claim. A person demanding mediation under this section may not demand or request mediation after a suit is filed relating to the same facts already mediated is filed.

Section 13. This act shall take effect July 1, 2014.

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