HB 533 2006

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A bill to be entitled

An act relating to insurance fraud; amending s. 322.21, F.S.; requiring an additional fee for certain offenses for purposes of reinstatement of a driver's license; amending s. 322.26, F.S.; specifying additional circumstances for mandatory revocation of a driver's license by the Department of Highway Safety and Motor Vehicles; amending s. 456.072, F.S.; specifying additional acts constituting grounds for certain disciplinary actions against health care professionals; amending s. 626.989, F.S.; authorizing the Division of Insurance Fraud to adopt rules for reporting suspected fraudulent activity; requiring the division to develop and maintain a World Wide Web site for certain purposes; creating s. 626.9893, F.S.; authorizing the Division of Insurance Fraud to deposit certain revenues from criminal or forfeiture proceedings into the Insurance Regulatory Trust Fund; specifying accounting and use requirements; providing for appropriation of such revenues; providing for carrying forward moneys remaining in the fund each year; amending s. 627.736, F.S.; requiring insurers to provide a notice to insureds or persons for whom certain reimbursement claims are filed; specifying notice contents; amending s. 817.234, F.S.; revising provisions specifying what constitutes a material omission and insurance fraud; prohibiting organizing, planning, or participating in a scheme to create documentation of a nonoccurring motor vehicle crash; providing penalties; amending s. 817.2361, F.S.; applying

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29 a criminal penalty to activities relating to false or 30 fraudulent proof of motor vehicle insurance; amending s. 31 817.50, F.S.; specifying nonapplication to certain law enforcement investigative actions of provisions relating 32 to evidence of intent to defraud a health care provider; 33 amending s. 817.505, F.S.; specifying an additional 34 35 circumstance of prohibited patient brokering, to which 36 penalties apply; revising the definition of "health care 37 provider or health care facility"; amending s. 843.08, F.S.; including officers of the Department of Financial 38 Services among the list of personnel for which a criminal 39 penalty is provided for falsely personating such 40 personnel; amending s. 932.7055, F.S.; providing for 41 42 deposit of certain proceeds seized by the division into 43 certain trust funds; repealing s. 19, ch. 2003-411, Laws 44 of Florida, relating to the future repeal of the Florida Motor Vehicle No-Fault Law; providing severability; 45 46 providing appropriations for certain purposes; providing 47 effective dates.

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

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- Section 1. Subsection (8) of section 322.21, Florida Statutes, is amended to read:
- 322.21 License fees; procedure for handling and collecting fees.--
- (8) Any person who applies for reinstatement following the suspension or revocation of the person's driver's license shall

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pay a service fee of \$35 following a suspension, and \$60 following a revocation, which is in addition to the fee for a license. Any person who applies for reinstatement of a commercial driver's license following the disqualification of the person's privilege to operate a commercial motor vehicle shall pay a service fee of \$60, which is in addition to the fee for a license. The department shall collect all of these fees at the time of reinstatement. The department shall issue proper receipts for such fees and shall promptly transmit all funds received by it as follows:

- (a) Of the \$35 fee received from a licensee for reinstatement following a suspension, the department shall deposit \$15 in the General Revenue Fund and \$20 in the Highway Safety Operating Trust Fund.
- (b) Of the \$60 fee received from a licensee for reinstatement following a revocation or disqualification, the department shall deposit \$35 in the General Revenue Fund and \$25 in the Highway Safety Operating Trust Fund.

If the revocation or suspension of the driver's license was for a violation of s. 316.193, or for refusal to submit to a lawful breath, blood, or urine test, an additional fee of \$115 must be charged. However, only one \$115 fee may be collected from one person convicted of violations arising out of the same incident. The department shall collect the \$115 fee and deposit the fee into the Highway Safety Operating Trust Fund at the time of reinstatement of the person's driver's license, but the fee may not be collected if the suspension or revocation is overturned.

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If the revocation or suspension of the driver's license was for a conviction for violation of s. 817.234(8)(b) or (c) or (9) or s. 817.505(1)(b)2. or (c), an additional fee of \$180 must be charged for each offense. The department shall collect and deposit the additional \$180 fee into the Highway Safety

Operating Trust Fund at the time of reinstatement of the person's driver's license.

- Section 2. Subsection (9) is added to section 322.26, Florida Statutes, to read:
- 322.26 Mandatory revocation of license by department.--The department shall forthwith revoke the license or driving privilege of any person upon receiving a record of such person's conviction of any of the following offenses:
- (9) Conviction in any court having jurisdiction over offenses committed under s. 817.234(8)(b) or (c) or (9) or s. 817.505(1)(b)2. or (c).
- Section 3. Paragraphs (hh) and (ii) are added to subsection (1) of section 456.072, Florida Statutes, to read:

 456.072 Grounds for discipline; penalties; enforcement.--
- (1) The following acts shall constitute grounds for which the disciplinary actions specified in subsection (2) may be taken:
- (hh) Paying or receiving any commission, bonus, kickback, or rebate or engaging in any split-fee arrangement, in any form whatsoever, with a physician, organization, agency, or person, directly or indirectly, for patients referred to providers of health care goods and services, including, but not limited to, hospitals, nursing homes, clinical laboratories, ambulatory

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surgical centers, or pharmacies. The provisions of this paragraph shall not be construed to prevent a health care provider from receiving a fee for professional consultation services.

- (ii) Submitting a claim for payment of diagnostic or treatment services of a person injured in an automobile crash when the licensee knows the automobile crash was staged or did not occur.
- Section 4. Subsection (6) of section 626.989, Florida Statutes, is amended, and subsection (10) is added to that section, to read:
- 626.989 Investigation by department or Division of Insurance Fraud; compliance; immunity; confidential information; reports to division; division investigator's power of arrest.--
- (6) Any person, other than an insurer, agent, or other person licensed under the code, or an employee thereof, having knowledge or who believes that a fraudulent insurance act or any other act or practice which, upon conviction, constitutes a felony or a misdemeanor under the code, or under s. 817.234, is being or has been committed may send to the Division of Insurance Fraud a report or information pertinent to such knowledge or belief and such additional information relative thereto as the department may request. Any professional practitioner licensed or regulated by the Department of Business and Professional Regulation, except as otherwise provided by law, any medical review committee as defined in s. 766.101, any private medical review committee, and any insurer, agent, or other person licensed under the code, or an employee thereof,

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having knowledge or who believes that a fraudulent insurance act or any other act or practice which, upon conviction, constitutes a felony or a misdemeanor under the code, or under s. 817.234, is being or has been committed shall send to the Division of Insurance Fraud a report or information pertinent to such knowledge or belief and such additional information relative thereto as the department may require. The Division of Insurance Fraud shall review such information or reports and select such information or reports as, in its judgment, may require further investigation. It shall then cause an independent examination of the facts surrounding such information or report to be made to determine the extent, if any, to which a fraudulent insurance act or any other act or practice which, upon conviction, constitutes a felony or a misdemeanor under the code, or under s. 817.234, is being committed. The Division of Insurance Fraud shall report any alleged violations of law which its investigations disclose to the appropriate licensing agency and state attorney or other prosecuting agency having jurisdiction with respect to any such violation, as provided in s. 624.310. If prosecution by the state attorney or other prosecuting agency having jurisdiction with respect to such violation is not begun within 60 days of the division's report, the state attorney or other prosecuting agency having jurisdiction with respect to such violation shall inform the division of the reasons for the lack of prosecution. The division may adopt rules that set forth requirements for the manner in which suspected fraudulent activity shall be reported to the division through the use of a standard referral form.

(10) The Division of Insurance Fraud may develop and maintain a World Wide Web site page for the purpose of posting the identities and photographs of persons convicted of violating s. 817.234(9).

Section 5. Section 626.9893, Florida Statutes, is created to read:

626.9893 Disposition of revenues; criminal or forfeiture proceedings.--

- (1) The Division of Insurance Fraud of the Department of Financial Services may deposit revenues received as a result of criminal proceedings or forfeiture proceedings, other than revenues deposited into the Department of Financial Services' Federal Equitable Sharing Trust Fund under s. 17.43, into the Insurance Regulatory Trust Fund. Moneys deposited pursuant to this subsection shall be separately accounted for and shall be used solely for the division to carry out its duties and responsibilities.
- (2) Moneys deposited into the Insurance Regulatory Trust Fund pursuant to subsection (1) shall be appropriated by the Legislature, pursuant to the provisions of chapter 216, for the sole purpose of enabling the division to carry out its duties and responsibilities.
- (3) Notwithstanding the provisions of s. 216.301 and pursuant to s. 216.351, any balance of moneys deposited into the Insurance Regulatory Trust Fund pursuant to subsection (1) remaining at the end of any fiscal year shall remain in the trust fund at the end of that year and shall be available for carrying out the duties and responsibilities of the Division of

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	115 000
197	Insurance Fraud.
198	Section 6. Subsection (14) is added to section 627.736,
199	Florida Statutes, to read:
200	627.736 Required personal injury protection benefits;
201	exclusions; priority; claims
202	(14) FRAUD ADVISORY NOTICE Upon receiving notice of a
203	claim under this section, an insurer shall provide to the
204	insured or to a person for whom a claim for reimbursement for
205	diagnosis or treatment of injuries has been filed, a notice that
206	shall advise that:
207	(a) Pursuant to s. 626.9892, the Department of Financial
208	Services may pay rewards of up to \$25,000 to persons providing
209	information leading to the arrest and conviction of persons
210	committing crimes investigated by the Division of Insurance
211	Fraud arising from violations of s. 440.105, s. 624.15, s.
212	626.9541, s. 626.989, or s. 817.234.
213	(b) Solicitation of a person injured in an automobile
214	crash to be treated or represented by a particular health care
215	provider or attorney could be a violation of s. 817.234, s.
216	817.505, or the rules regulating The Florida Bar and should
217	immediately be reported to the department if illegal or
218	unethical conduct is suspected.
219	Section 7. Paragraph (a) of subsection (7) and subsection
220	(9) of section 817.234, Florida Statutes, are amended to read:
221	817.234 False and fraudulent insurance claims
222	(7)(a) It shall constitute a material omission and
223	incurance fraud punishable as provided in subsection (11) for

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any service physician or other provider, other than a hospital,

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to engage in a general business practice of billing amounts as its usual and customary charge, if such provider has agreed with the <u>insured patient</u> or intends to waive deductibles or copayments, or does not for any other reason intend to collect the total amount of such charge. With respect to a determination as to whether a <u>service physician or other</u> provider has engaged in such general business practice, consideration shall be given to evidence of whether the <u>service physician or other</u> provider made a good faith attempt to collect such deductible or copayment. This paragraph does not apply to <u>service physicians</u> or other providers who waive deductibles or copayments or reduce their bills as part of a bodily injury settlement or verdict.

- (9) A person may not organize, plan, or knowingly participate in an intentional motor vehicle crash or a scheme to create documentation of a motor vehicle crash that did not occur for the purpose of making motor vehicle tort claims or claims for personal injury protection benefits as required by s. 627.736. Any person who violates this subsection commits a felony of the second degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084. A person who is convicted of a violation of this subsection shall be sentenced to a minimum term of imprisonment of 2 years.
- Section 8. Section 817.2361, Florida Statutes, is amended to read:
- 817.2361 False or fraudulent <u>proof of motor vehicle</u> insurance card.--Any person who, with intent to deceive any other person, creates, markets, or presents a false or fraudulent <u>proof of motor vehicle</u> insurance card commits a

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253 felony of the third degree, punishable as provided in s.

254 775.082, s. 775.083, or s. 775.084.

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- Section 9. Subsection (2) of section 817.50, Florida Statutes, is amended to read:
 - 817.50 Fraudulently obtaining goods, services, etc., from a health care provider.--
 - (2) If any person gives to any health care provider in this state a false or fictitious name or a false or fictitious address or assigns to any health care provider the proceeds of any health maintenance contract or insurance contract, then knowing that such contract is no longer in force, is invalid, or is void for any reason, such action shall be prima facie evidence of the intent of such person to defraud the health care provider. However, this subsection does not apply to investigative actions taken by law enforcement officers for law enforcement purposes in the course of their official duties.
 - Section 10. Paragraph (b) of subsection (1) and paragraph (a) of subsection (2) of section 817.505, Florida Statutes, are amended to read:
 - 817.505 Patient brokering prohibited; exceptions; penalties.--
 - (1) It is unlawful for any person, including any health care provider or health care facility, to:
 - (b) Solicit or receive any commission, bonus, rebate, kickback, or bribe, directly or indirectly, in cash or in kind, or engage in any split-fee arrangement, in any form whatsoever, in return for:

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1. Referring patients or patronage to a health care provider or health care facility; or

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- 2. Signing a disclosure and acknowledgment form or a patient log required by s. 627.736(5) when such medical treatment is intentionally not provided; or
 - (2) For the purposes of this section, the term:
- "Health care provider or health care facility" means (a) any person or entity licensed, certified, or registered, or required to be licensed, certified, or registered, under part I, part II, part III, or part IV of chapter 395, part XIII of chapter 400, chapter 457, chapter 458, chapter 459, chapter 460, chapter 461, chapter 462, chapter 463, chapter 464, chapter 465, chapter 466, chapter 467, part I, part II, part III, part IV, part X, part XIII, or part XIV of chapter 468, chapter 480, chapter 484, chapter 486, chapter 490, or chapter 491, or lawfully exempt from such licensure, certification, or registration with the Agency for Health Care Administration; any person or entity that has contracted with the Agency for Health Care Administration to provide goods or services to Medicaid recipients as provided under s. 409.907; a county health department established under part I of chapter 154; any community service provider contracting with the Department of Children and Family Services to furnish alcohol, drug abuse, or mental health services under part IV of chapter 394; any substance abuse service provider licensed under chapter 397; or any federally supported primary care program such as a migrant or community health center authorized under ss. 329 and 330 of the United States Public Health Services Act.

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308 Section 11. Section 843.08, Florida Statutes, is amended 309 to read: 310 843.08 Falsely personating officer, etc.--A person who 311 falsely assumes or pretends to be a sheriff, officer of the 312 Florida Highway Patrol, officer of the Fish and Wildlife Conservation Commission, officer of the Department of 313 314 Environmental Protection, officer of the Department of 315 Transportation, officer of the Department of Corrections, 316 officer of the Department of Financial Services, correctional 317 probation officer, deputy sheriff, state attorney or assistant 318 state attorney, statewide prosecutor or assistant statewide 319 prosecutor, state attorney investigator, coroner, police officer, lottery special agent or lottery investigator, beverage 320 321 enforcement agent, or watchman, or any member of the Parole 322 Commission and any administrative aide or supervisor employed by 323 the commission, or any personnel or representative of the 324 Department of Law Enforcement, and takes upon himself or herself 325 to act as such, or to require any other person to aid or assist 326 him or her in a matter pertaining to the duty of any such 327 officer, commits a felony of the third degree, punishable as 328 provided in s. 775.082, s. 775.083, or s. 775.084; however, a person who falsely personates any such officer during the course 329 of the commission of a felony commits a felony of the second 330 331 degree, punishable as provided in s. 775.082, s. 775.083, or s. 332 775.084; except that if the commission of the felony results in 333 the death or personal injury of another human being, the person 334 commits a felony of the first degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084. 335

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336 Section 12. Paragraph (n) is added to subsection (6) of 337 section 932.7055, Florida Statutes, to read: 338 932.7055 Disposition of liens and forfeited property .--339 If the seizing agency is a state agency, all remaining 340 proceeds shall be deposited into the General Revenue Fund. 341 However, if the seizing agency is: 342 The Division of Insurance Fraud of the Department of 343 Financial Services, the proceeds accrued under the Florida Contraband Forfeiture Act shall be deposited into the Insurance 344 Regulatory Trust Fund as provided in s. 626.9893 or into the 345 346 Department of Financial Services' Federal Equitable Sharing 347 Trust Fund as provided in s. 17.43, as applicable. 348 Section 13. Effective upon this act becoming a law, 349 section 19 of chapter 2003-411, Laws of Florida, is repealed. Section 14. If any provision of this act or its 350 351 application to any person or circumstance is held invalid, the 352 invalidity does not affect other provisions or applications of 353 the act which can be given effect without the invalid provision 354 or application, and to this end the provisions of this act are 355 declared severable. 356 Section 15. For the 2006-2007 fiscal year: 357 (1) The sum of \$1,670,000 in recurring funds is 358 appropriated from the Insurance Regulatory Trust Fund, and nine 359 new positions are authorized to the Division of Insurance Fraud 360 within the Department of Financial Services. The purposes of 361 this appropriation are to administer and implement the

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fraud unit in the Division of Insurance Fraud of the Department

provisions of s. 626.989, Florida Statutes, establish a new

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of Financial Services, and provide an approximate \$10,000 salary increase for each of the 122 existing sworn fraud law enforcement investigators within the Division of Insurance Fraud to achieve relative parity with investigators who have similar responsibilities at other state law enforcement agencies. The Legislature recognizes and finds that without such an increase, the Division of Insurance Fraud will continue to have difficulty recruiting, training, and retaining qualified and experienced fraud investigators.

(2) The sum of \$750,000 in recurring funds is appropriated to the state attorneys' offices in the six judicial circuits comprising Broward, Palm Beach, Hillsborough, Pinellas/Pasco, Duval, and Orange Counties. The purpose of this appropriation is to establish and fund six new prosecutors dedicated to insurance fraud cases.

Section 16. Except as otherwise expressly provided in this act, this act shall take effect July 1, 2006.