Florida Senate - 2008

By Senator Deutch

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	30-02964-08 20082012
1	A bill to be entitled
2	An act relating to long-term care policies; amending s.
3	627.94073, F.S.; revising provisions requiring that
4	insurers notify policyholders of the right to designate a
5	secondary addressee to receive a notice of termination;
6	requiring that a canceled policy be reinstated if the
7	policyholder failed to pay the premium due to an extended
8	hospital confinement; providing an effective date.
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10	Be It Enacted by the Legislature of the State of Florida:
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12	Section 1. Section 627.94073, Florida Statutes, is amended
13	to read:
14	627.94073 Notice of cancellation; grace period
15	(1) A long-term care policy shall provide that the insured
16	is entitled to a grace period of not less than 30 days, within
17	which payment of any premium after the first may be made. The
18	insurer may require payment of an interest charge not in excess
19	of 8 percent per year for the number of days elapsing before the
20	payment of the premium, during which period the policy shall
21	continue in force. If the policy becomes a claim during the grace
22	period before the overdue premium is paid, the amount of such
23	premium or premiums with interest not in excess of 8 percent per
24	year may be deducted in any settlement under the policy.
25	(2) A long-term care policy may not be canceled for
26	nonpayment of premium unless, after expiration of the grace
27	period in subsection (1), and at least 30 days prior to the

29 notification of possible lapse in coverage to the policyholder

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effective date of such cancellation, the insurer has mailed a

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30 and to a specified secondary addressee if such addressee has been 31 designated in writing by name and address by the policyholder. 32 For policies issued or renewed on or after October 1, 1996, the 33 insurer shall notify the policyholder, at least once annually 34 every 2 years, of the right to designate a secondary addressee. 35 The applicant has the right to designate at least one person who is to receive the notice of termination, in addition to the 36 37 insured. Designation shall not constitute acceptance of any 38 liability on the third party for services provided to the 39 insured. The form used for the written designation must provide 40 space clearly designated for listing at least one person. The 41 form must also inform the policyholder to update any change made 42 to the address of the secondary addressee. The designation shall 43 include each person's full name and home address. In the case of 44 an applicant who elects not to designate an additional person, 45 the waiver shall state: "Protection against unintended lapse.--I 46 understand that I have the right to designate at least one person other than myself to receive notice of lapse or termination of 47 48 this long-term care or limited benefit insurance policy for 49 nonpayment of premium. I understand that notice will not be given 50 until 30 days after a premium is due and unpaid. I elect NOT to 51 designate any person to receive such notice." Notice shall be 52 given by United States Postal Service proof of mailing or certified or registered mail to the policyholder at the address 53 54 shown in the policy. first class United States mail, postage 55 prepaid, and Notice may not be given until 30 days after a 56 premium is due and unpaid. Notice shall be deemed to have been 57 given as of 5 days after the date of mailing.

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58 (3) If a policy is canceled due to nonpayment of premium, 59 the policyholder is shall be entitled to have the policy 60 reinstated if, within a period of not less than 5 months after 61 the date of cancellation, the policyholder or any secondary 62 addressee designated pursuant to subsection (2) demonstrates that 63 the failure to pay the premium when due was unintentional and due to the policyholder's cognitive impairment, or loss of functional 64 65 capacity, or continuous hospital confinement of the policyholder 66 for a period in excess of 60 days. Policy reinstatement shall be 67 subject to payment of overdue premiums. The standard of proof of 68 cognitive impairment or loss of functional capacity shall not be 69 more stringent than the benefit eligibility criteria for 70 cognitive impairment or the loss of functional capacity, if any, contained in the policy and certificate. The insurer may require 71 72 payment of an interest charge not in excess of 8 percent per year 73 for the number of days elapsing before the payment of the 74 premium, during which period the policy shall continue in force 75 if the demonstration of cognitive impairment is made. If the 76 policy becomes a claim during the 180-day period before the 77 overdue premium is paid, the amount of the premium or premiums 78 with interest not in excess of 8 percent per year may be deducted 79 in any settlement under the policy.

80 (4) When the policyholder or certificateholder pays premium 81 for a long-term care insurance policy or certificate policy 82 through a payroll or pension deduction plan, the requirements in 83 subsection (2) need not be met until 60 days after the 84 policyholder or certificateholder is no longer on such a payment 85 plan. The application or enrollment form for such policies or

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ificates shall clearly indicate the payment plan selected by
applicant.
Section 2. This act shall take effect July 1, 2008.
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