By the Committees on Rules; and Banking and Insurance; and Senator Braynon

A bill to be entitled

595-03705-14

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20141344c2

2 An act relating to insurance; amending s. 626.8805, 3 F.S.; revising insurance administrator application 4 requirements; amending s. 626.8817, F.S.; authorizing 5 an insurer's designee to provide certain coverage 6 information to an insurance administrator; authorizing 7 an insurer to contract a third party to conduct a 8 review of the operations of an insurance administrator 9 under certain circumstances; amending s. 626.882, 10 F.S.; prohibiting a person from acting as an insurance 11 administrator without a specific written agreement; 12 amending s. 626.883, F.S.; requiring an insurance 13 administrator to furnish fiduciary account records to an insurer or its designee; requiring administrator 14 15 withdrawals from a fiduciary account to be made according to a specific written agreement; providing 16 17 that an insurer's designee may authorize payment of 18 claims; amending s. 626.884, F.S.; revising an 19 insurer's right of access to certain administrator 20 records; amending s. 626.89, F.S.; revising the 21 deadline for filing certain financial statements; 22 amending s. 626.9541, F.S.; revising provisions for 23 unfair methods of competition and unfair or deceptive 24 acts relating to conducting certain insurance 25 transactions through credit card facilities; amending s. 627.351, F.S.; revising the entities that make 2.6 27 recommendations to the Chief Financial Officer for 28 appointment to the board of governors of the Joint 29 Underwriting Association; amending s. 627.7283, F.S.;

Page 1 of 13

	595-03705-14 20141344c2
30	allowing the electronic transfer of unearned premiums
31	under specified circumstances; amending s. 631.912,
32	F.S.; revising the appointment process for members of
33	the board of directors of the Florida Workers'
34	Compensation Insurance Guaranty Association; amending
35	s. 766.315, F.S.; revising the entities that make
36	recommendations to the Chief Financial Officer for
37	appointment to the board of directors of the Florida
38	Birth-Related Neurological Injury Compensation
39	Association; providing an effective date.
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41	Be It Enacted by the Legislature of the State of Florida:
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43	Section 1. Paragraph (c) of subsection (2) and subsection
44	(3) of section 626.8805, Florida Statutes, are amended to read:
45	626.8805 Certificate of authority to act as administrator
46	(2) The administrator shall file with the office an
47	application for a certificate of authority upon a form to be
48	adopted by the commission and furnished by the office, which
49	application shall include or have attached the following
50	information and documents:
51	(c) The names, addresses, official positions, and
52	professional qualifications of the individuals employed or
53	retained by the administrator who are responsible for the
54	conduct of the affairs of the administrator, including all
55	members of the board of directors, board of trustees, executive
56	committee, or other governing board or committee, <u>and</u> the
57	principal officers in the case of a corporation $\overline{ ext{or}}_{m{ au}}$ the partners
58	or members in the case of a partnership or association, and any

Page 2 of 13

595-03705-14 20141344c2 59 other person who exercises control or influence over the affairs 60 of the administrator. (3) The applicant shall make available for inspection by 61 62 the office copies of all contracts relating to services provided 63 by the administrator to with insurers or other persons using utilizing the services of the administrator. 64 65 Section 2. Subsections (1) and (3) of section 626.8817, 66 Florida Statutes, are amended to read: 626.8817 Responsibilities of insurance company with respect 67 68 to administration of coverage insured.-69 (1) If an insurer uses the services of an administrator, 70 the insurer is responsible for determining the benefits, premium 71 rates, underwriting criteria, and claims payment procedures 72 applicable to the coverage and for securing reinsurance, if any. 73 The rules pertaining to these matters shall be provided, in 74 writing, by the insurer or its designee to the administrator. 75 The responsibilities of the administrator as to any of these 76 matters shall be set forth in a the written agreement binding 77 upon between the administrator and the insurer. 78 (3) If In cases in which an administrator administers 79 benefits for more than 100 certificateholders on behalf of an 80 insurer, the insurer shall, at least semiannually, conduct a 81 review of the operations of the administrator. At least one such 82 review must be an onsite audit of the operations of the 83 administrator. The insurer may contract with a qualified third 84 party to conduct such review. 85 Section 3. Subsections (1) and (4) of section 626.882, 86 Florida Statutes, are amended to read: 87 626.882 Agreement between administrator and insurer;

Page 3 of 13

595-03705-14 20141344c2 88 required provisions; maintenance of records.-(1) <u>A</u> No person may not act as an administrator without a 89 90 written agreement, as required under s. 626.8817, which 91 specifies the rights, duties, and obligations of the between 92 such person as administrator and an insurer. 93 (4) If a policy is issued to a trustee or trustees, a copy 94 of the trust agreement and any amendments to that agreement 95 shall be furnished to the insurer or its designee by the 96 administrator and shall be retained as part of the official 97 records of both the administrator and the insurer for the 98 duration of the policy and for 5 years thereafter. 99 Section 4. Subsections (3), (4), and (5) of section 626.883, Florida Statutes, are amended to read: 100 101 626.883 Administrator as intermediary; collections held in 102 fiduciary capacity; establishment of account; disbursement; 103 payments on behalf of insurer.-104 (3) If charges or premiums deposited in a fiduciary account 105 have been collected on behalf of or for more than one insurer, 106 the administrator shall keep records clearly recording the 107 deposits in and withdrawals from such account on behalf of or 108 for each insurer. The administrator shall, upon request of an insurer or its designee, furnish such insurer or designee with 109 110 copies of records pertaining to deposits and withdrawals on behalf of or for such insurer. 111 112 (4) The administrator may not pay any claim by withdrawals 113 from a fiduciary account. Withdrawals from such account shall be made as provided in the written agreement required under ss. 114 115 626.8817 and 626.882 between the administrator and the insurer 116 for any of the following:

Page 4 of 13

595-03705-14 20141344c2 117 (a) Remittance to an insurer entitled to such remittance. 118 (b) Deposit in an account maintained in the name of such insurer. 119 120 (c) Transfer to and deposit in a claims-paying account, 121 with claims to be paid as provided by such insurer. (d) Payment to a group policyholder for remittance to the 122 123 insurer entitled to such remittance. 124 (e) Payment to the administrator of the commission, fees, 125 or charges of the administrator. 126 (f) Remittance of return premium to the person or persons 127 entitled to such return premium. 128 (5) All claims paid by the administrator from funds 129 collected on behalf of the insurer shall be paid only on drafts 130 of, and as authorized by, such insurer or its designee. Section 5. Subsection (3) of section 626.884, Florida 131 132 Statutes, is amended to read: 133 626.884 Maintenance of records by administrator; access; 134 confidentiality.-135 (3) The insurer shall retain the right of continuing access 136 to books and records maintained by the administrator sufficient 137 to permit the insurer to fulfill all of its contractual 138 obligations to insured persons, subject to any restrictions in 139 the written agreement pertaining to between the insurer and the 140 administrator on the proprietary rights of the parties in such books and records. 141 142 Section 6. Subsections (1) and (2) of section 626.89, 143 Florida Statutes, are amended to read: 144 626.89 Annual financial statement and filing fee; notice of 145 change of ownership.-

Page 5 of 13

595-03705-14 20141344c2 146 (1) Each authorized administrator shall annually file with 147 the office a full and true statement of its financial condition, transactions, and affairs within 3 months after the end of the 148 149 administrator's fiscal year. The statement shall be filed annually on or before March 1 or within such extension of time 150 151 therefor as the office for good cause may have granted. The 152 statement must and shall be for the preceding fiscal calendar 153 year and must. The statement shall be in such form and contain such matters as the commission prescribes and must shall be 154 155 verified by at least two officers of the such administrator. An 156 administrator whose sole stockholder is an association 157 representing health care providers which is not an affiliate of 158 an insurer, an administrator of a pooled governmental self-159 insurance program, or an administrator that is a university may 160 submit the preceding fiscal year's statement within 2 months 161 after its fiscal year end. 162 (2) Each authorized administrator shall also file an 163 audited financial statement performed by an independent

164 certified public accountant. The audited financial statement 165 shall be filed with the office within 5 months after the end of 166 the administrator's fiscal year and be on or before June 1 for 167 the preceding fiscal calendar year ending December 31. An 168 administrator whose sole stockholder is an association 169 representing health care providers which is not an affiliate of 170 an insurer, an administrator of a pooled governmental self-171 insurance program, or an administrator that is a university may 172 submit the preceding fiscal year's audited financial statement 173 within 5 months after the end of its fiscal year. An audited 174 financial statement prepared on a consolidated basis must

Page 6 of 13

	595-03705-14 20141344c2
175	include a columnar consolidating or combining worksheet that
176	must be filed with the statement and must comply with the
177	following:
178	(a) Amounts shown on the consolidated audited financial
179	statement must be shown on the worksheet;
180	(b) Amounts for each entity must be stated separately; and
181	(c) Explanations of consolidating and eliminating entries
182	must be included.
183	Section 7. Paragraph (q) of subsection (1) of section
184	626.9541, Florida Statutes, is amended to read:
185	626.9541 Unfair methods of competition and unfair or
186	deceptive acts or practices defined
187	(1) UNFAIR METHODS OF COMPETITION AND UNFAIR OR DECEPTIVE
188	ACTSThe following are defined as unfair methods of competition
189	and unfair or deceptive acts or practices:
190	(q) Certain insurance transactions through credit card
191	facilities prohibited
192	1. Except as provided in subparagraph 3., no person shall
193	knowingly solicit or negotiate any insurance; seek or accept
194	applications for insurance; issue or deliver any policy;
195	receive, collect, or transmit premiums, to or for <u>an</u> any
196	insurer; or otherwise transact insurance in this state, or
197	relative to a subject of insurance resident, located, or to be
198	performed in this state, through the arrangement or facilities
199	of a credit card facility or organization, for the purpose of
200	insuring credit card holders or prospective credit card holders.
201	The term "credit card holder" as used in this paragraph means \underline{a}
202	any person who may pay the charge for purchases or other
203	transactions through the credit card facility or organization,

Page 7 of 13

595-03705-14 20141344c2 204 whose credit with such facility or organization is evidenced by 205 a credit card identifying such person as being one whose charges 206 the credit card facility or organization will pay, and who is 207 identified as such upon the credit card either by name, account 208 number, symbol, insignia, or any other method or device of 209 identification. This subparagraph does not apply as to health 210 insurance or to credit life, credit disability, or credit 211 property insurance.

2. If Whenever any person does or performs in this state 212 213 any of the acts in violation of subparagraph 1. for or on behalf 214 of an any insurer or credit card facility, such insurer or credit card facility shall be deemed held to be doing business 215 216 in this state and, if an insurer, shall be subject to the same 217 state, county, and municipal taxes as insurers that have been 218 legally qualified and admitted to do business in this state by 219 agents or otherwise are subject, the same to be assessed and 220 collected against such insurers; and such person so doing or 221 performing any of such acts is shall be personally liable for 222 all such taxes.

223 3. A licensed agent or insurer may solicit or negotiate any 224 insurance; seek or accept applications for insurance; issue or 225 deliver any policy; receive, collect, or transmit premiums, to 226 or for an any insurer; or otherwise transact insurance in this 227 state, or relative to a subject of insurance resident, located, 228 or to be performed in this state, through the arrangement or 229 facilities of a credit card facility or organization, for the 230 purpose of insuring credit card holders or prospective credit card holders if: 231

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a. The insurance or policy which is the subject of the

Page 8 of 13

595-03705-14 20141344c2 233 transaction is noncancelable by any person other than the named 234 insured, the policyholder, or the insurer; 235 b. Any refund of unearned premium is made directly to the 236 credit card holder by mail or electronic transfer; and 237 c. The credit card transaction is authorized by the 238 signature of the credit card holder or other person authorized 239 to sign on the credit card account. 240 The conditions enumerated in sub-subparagraphs a.-c. do not 241 242 apply to health insurance or to credit life, credit disability, 243 or credit property insurance; and sub-subparagraph c. does not 244 apply to property and casualty insurance if so long as the 245 transaction is authorized by the insured. 246 4. No person may use or disclose information resulting from 247 the use of a credit card in conjunction with the purchase of 248 insurance if, when such information is to the advantage of the 249 such credit card facility or an insurance agent, or is to the 250 detriment of the insured or any other insurance agent; except 251 that this provision does not prohibit a credit card facility 252 from using or disclosing such information in a any judicial 253 proceeding or consistent with applicable law on credit 254 reporting. 255 5. No Such insurance may not shall be sold through a credit

card facility in conjunction with membership in any automobile club. The term "automobile club" means a legal entity <u>that</u> which, in consideration of dues, assessments, or periodic payments of money, promises its members or subscribers to assist them in matters relating to the ownership, operation, use, or maintenance of a motor vehicle; however, the <u>term</u> definition of

Page 9 of 13

	595-03705-14 20141344c2
262	automobile clubs does not include persons, associations, or
263	corporations that which are organized and operated solely for
264	the purpose of conducting, sponsoring, or sanctioning motor
265	vehicle races, exhibitions, or contests upon racetracks, or upon
266	race courses established and marked as such for the duration of
267	such particular event. The words "motor vehicle" used herein
268	shall be the same as defined in chapter 320.
269	Section 8. Paragraph (c) of subsection (4) of section
270	627.351, Florida Statutes, is amended to read:
271	627.351 Insurance risk apportionment plans.—
272	(4) MEDICAL MALPRACTICE RISK APPORTIONMENT
273	(c) The Joint Underwriting Association shall operate
274	subject to the supervision and approval of a board of governors
275	consisting of representatives of five of the insurers
276	participating in the Joint Underwriting Association, an attorney
277	to be named by The Florida Bar, a physician to be named by the
278	Florida Medical Association, a dentist to be named by the
279	Florida Dental Association, and a hospital representative to be
280	named by the Florida Hospital Association. The Chief Financial
281	Officer shall select the representatives of the five insurers.
282	One insurer representative shall be selected from
283	recommendations of the American Insurance Association. One
284	insurer representative shall be selected from recommendations of
285	the Property Casualty Insurers Association of America Alliance
286	of American Insurers. One insurer representative shall be
287	selected from recommendations of the Florida Insurance Council
288	National Association of Independent Insurers. Two insurer
289	representatives shall be selected to represent insurers that are
290	not affiliated with these associations. The board of governors
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Page 10 of 13

595-03705-14 20141344c2 291 shall choose, During the first meeting of the board after June 30 of each year, the board shall choose one of its members to 292 293 serve as chair of the board and another member to serve as vice 294 chair of the board. There is shall be no liability on the part 295 of, and no cause of action of any nature shall arise against, 296 any member insurer, self-insurer, or its agents or employees, 297 the Joint Underwriting Association or its agents or employees, 298 members of the board of governors, or the office or its 299 representatives for any action taken by them in the performance 300 of their powers and duties under this subsection. 301 Section 9. Subsections (1), (2), and (3) of section 302 627.7283, Florida Statutes, are amended to read: 303 627.7283 Cancellation; return of premium.-304 (1) If the insured cancels a policy of motor vehicle insurance, the insurer must mail or electronically transfer the 305 306 unearned portion of any premium paid within 30 days after the 307 effective date of the policy cancellation or receipt of notice 308 or request for cancellation, whichever is later. This 309 requirement applies to a cancellation initiated by an insured 310 for any reason.

(2) If an insurer cancels a policy of motor vehicle insurance, the insurer must mail <u>or electronically transfer</u> the unearned premium portion of any premium within 15 days after the effective date of the policy cancellation.

(3) If the unearned premium is not mailed <u>or electronically</u> <u>transferred</u> within the applicable period, the insurer must pay to the insured 8 percent interest on the amount due. If the unearned premium is not mailed <u>or electronically transferred</u> within 45 days after the applicable period, the insured may

Page 11 of 13

595-03705-14 20141344c2 320 bring an action against the insurer pursuant to s. 624.155. 321 Section 10. Subsection (1) of section 631.912, Florida 322 Statutes, is amended to read: 323 631.912 Board of directors.-324 (1) The board of directors of the corporation shall consist 325 of 11 persons, 1 of whom is the insurance consumer advocate 326 appointed under s. 627.0613 or designee and 1 of whom is 327 designated by the Chief Financial Officer. The department shall 328 appoint to the board 6 persons selected by private carriers from 329 among the 20 workers' compensation insurers with the largest 330 amount of net direct written premium as determined by the 331 department, and 2 $\frac{3}{2}$ persons selected by the self-insurance 332 funds. The Governor shall appoint 1 person who has commercial 333 insurance experience. At least two of the private carriers shall be foreign carriers authorized to do business in this state. The 334 335 board shall elect a chairperson from among its members. The 336 Chief Financial Officer may remove any board member for cause. 337 Each board member shall be appointed to serve for a 4-year term 338 and may be reappointed. A vacancy on the board shall be filled 339 for the remaining period of the term in the same manner by which 340 the original appointment was made. 341 Section 11. Paragraph (a) of subsection (2) of section 766.315, Florida Statutes, is amended to read: 342 343 766.315 Florida Birth-Related Neurological Injury Compensation Association; board of directors.-344 345 (2) (a) The Chief Financial Officer may select the 346 representative of the participating physicians from a list of at 347 least three names to be recommended by the American Congress of Obstetricians and Gynecologists, District XII Florida Obstetric 348

Page 12 of 13

	595-03705-14 20141344c2
349	and Gynecologic Society; the representative of hospitals from a
350	list of at least three names to be recommended by the Florida
351	Hospital Association; the representative of casualty insurers
352	from a list of at least three names, one of which is recommended
353	by the American Insurance Association, one of which is
354	recommended by the Florida Insurance Council Alliance of
355	American Insurers, and one of which is recommended by the
356	Property Casualty Insurers Association of America National
357	Association of Independent Insurers; and the representative of
358	physicians, other than participating physicians, from a list of
359	three names to be recommended by the Florida Medical Association
360	and a list of three names to be recommended by the Florida
361	Osteopathic Medical Association. <u>However,</u> In no case shall the
362	Chief Financial Officer <u>is not required</u> be bound to make <u>an</u> any
363	appointment from among the nominees of the such respective
364	associations.

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Section 12. This act shall take effect July 1, 2014.

Page 13 of 13