**By** the Committees on Banking and Insurance; Judiciary; and Banking and Insurance; and Senators Brandes and Bracy

i	597-04033-19       2019714c3
1	A bill to be entitled
2	An act relating to insurance; providing a short title;
3	amending s. 215.555, F.S.; increasing the required
4	reimbursement of loss adjustment expenses in
5	reimbursement contracts between the State Board of
6	Administration and property insurers under the Florida
7	Hurricane Catastrophe Fund; amending s. 319.30, F.S.;
8	specifying means by which an insurance company may
9	forward certificates of title of certain salvage motor
10	vehicles or mobile homes to the Department of Highway
11	Safety and Motor Vehicles; revising the effective date
12	of certain procedures and requirements relating to
13	certificates of title; providing that certain
14	electronic signatures satisfy certain signature
15	requirements; amending s. 440.381, F.S.; revising a
16	criminal penalty for the submission, with certain
17	intent, of an employer application for workers'
18	compensation insurance coverage which contains false,
19	misleading, or incomplete information; providing that
20	certain sworn statements in such applications are not
21	required to be notarized; creating s. 624.1055, F.S.;
22	providing a right of contribution among insurers for
23	defense costs under certain circumstances; providing a
24	requirement for, and authorizing the use of certain
25	factors by, a court in allocating costs; providing a
26	cause of action to enforce the right of contribution;
27	providing construction and applicability; amending s.
28	624.155, F.S.; deleting a provision that tolls, under
29	certain circumstances, a period before a civil action

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30	against an insurer may be brought; deleting a
31	provision authorizing the Department of Financial
32	Services to return a civil remedy notice for lack of
33	specificity; prohibiting the filing of the notice
34	within a certain timeframe under certain
35	circumstances; amending s. 624.404, F.S.; adding a
36	circumstance under which the Office of Insurance
37	Regulation may waive a 3-year operation requirement
38	for foreign or alien insurers and exchanges; amending
39	s. 624.4085, F.S.; specifying the applicable formula
40	for determining risk-based capital of certain health
41	maintenance organizations and prepaid limited health
42	service organizations; amending s. 626.914, F.S.;
43	revising the definition of the term "diligent effort"
44	as used in the Surplus Lines Law; amending s. 627.062,
45	F.S.; specifying applicable rate standards and
46	requirements for certain personal lines residential
47	property insurance; creating s. 627.1711, F.S.;
48	providing a limitation on certain personal lines
49	residential property insurance policies that may be
50	written or renewed by an insurer each calendar year;
51	amending s. 627.4102, F.S.; providing an exemption, if
52	certain conditions are met, from a form approval
53	process for certain personal lines residential
54	property insurance forms; amending s. 626.916, F.S.;
55	specifying applicable requirements before certain
56	personal lines residential property insurance may be
57	exported; deleting a limit on fees charged by filing
58	surplus lines agents per policy certified for export;

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59	authorizing retail agents to charge reasonable fees
60	for placing surplus lines policies; specifying
61	requirements for itemizing and enumerating fees;
62	amending s. 626.9541, F.S.; providing that insurers
63	and agents may give insureds certain free or
64	discounted loss mitigation services or loss control
65	items; deleting a limitation on the value of loss
66	mitigation services that may be given to insureds;
67	amending s. 627.0655, F.S.; revising circumstances
68	under which insurers or certain authorized persons may
69	provide certain premium discounts to insureds;
70	amending s. 627.426, F.S.; adding means by which
71	liability insurers may provide to named insureds
72	certain notices relating to coverage denials based on
73	a particular coverage defense; amending s. 627.4555,
74	F.S.; requiring life insurers that are required to
75	provide a specified notice to policyowners of an
76	impending lapse in coverage to also notify the
77	policyowner's agent of record within a certain
78	timeframe; providing that the agent is not responsible
79	for any lapse in coverage; exempting the insurer from
80	the requirement under certain circumstances; amending
81	s. 627.7015, F.S.; adding circumstances under which
82	certain property insurers may provide required notice
83	to policyholders of their right to participate in a
84	certain mediation program; amending s. 627.7295, F.S.;
85	reducing the collected premium required before private
86	passenger motor vehicle insurance policies or binders
87	may be initially issued; amending s. 921.0022, F.S.;

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88	conforming a provision to changes made by the act;
89	providing effective dates.
90	
91	Be It Enacted by the Legislature of the State of Florida:
92	
93	Section 1. This act may be cited as "Omnibus Prime."
94	Section 2. Effective upon this act becoming a law,
95	paragraph (b) of subsection (4) of section 215.555, Florida
96	Statutes, is amended to read:
97	215.555 Florida Hurricane Catastrophe Fund
98	(4) REIMBURSEMENT CONTRACTS
99	(b)1. The contract shall contain a promise by the board to
100	reimburse the insurer for 45 percent, 75 percent, or 90 percent
101	of its losses from each covered event in excess of the insurer's
102	retention, plus 5 percent of the reimbursed losses to cover loss
103	adjustment expenses. For contracts and rates effective on or
104	after June 1, 2019, the loss adjustment expense reimbursement
105	must be 10 percent of the reimbursed losses.
106	2. The insurer must elect one of the percentage coverage
107	levels specified in this paragraph and may, upon renewal of a
108	reimbursement contract, elect a lower percentage coverage level
109	if no revenue bonds issued under subsection (6) after a covered
110	event are outstanding, or elect a higher percentage coverage
111	level, regardless of whether or not revenue bonds are
112	outstanding. All members of an insurer group must elect the same
113	percentage coverage level. Any joint underwriting association,
114	risk apportionment plan, or other entity created under s.
115	627.351 must elect the 90-percent coverage level.
116	3. The contract shall provide that reimbursement amounts

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597-04033-19 2019714c3 117 shall not be reduced by reinsurance paid or payable to the 118 insurer from other sources. Section 3. Paragraph (b) of subsection (3) of section 119 120 319.30, Florida Statutes, is amended, and paragraph (d) is added 121 to that section, to read: 319.30 Definitions; dismantling, destruction, change of 122 123 identity of motor vehicle or mobile home; salvage.-124 (3) 125 (b) The owner, including persons who are self-insured, of a 126 motor vehicle or mobile home that is considered to be salvage 127 shall, within 72 hours after the motor vehicle or mobile home 128 becomes salvage, forward the title to the motor vehicle or 129 mobile home to the department for processing. However, an 130 insurance company that pays money as compensation for the total loss of a motor vehicle or mobile home shall obtain the 131 132 certificate of title for the motor vehicle or mobile home, make 133 the required notification to the National Motor Vehicle Title 134 Information System, and, within 72 hours after receiving such 135 certificate of title, forward such title by electronic means, 136 the United States Postal Service, or another commercially 137 available delivery service to the department for processing. The 138 owner or insurance company, as applicable, may not dispose of a 139 vehicle or mobile home that is a total loss before it obtains a 140 salvage certificate of title or certificate of destruction from 141 the department. Effective July 1, 2020 July 1, 2023:

142 1. Thirty days after payment of a claim for compensation 143 pursuant to this paragraph, the insurance company may receive a 144 salvage certificate of title or certificate of destruction from 145 the department if the insurance company is unable to obtain a

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597-04033-19 2019714c3 146 properly assigned certificate of title from the owner or 147 lienholder of the motor vehicle or mobile home, if the motor 148 vehicle or mobile home does not carry an electronic lien on the 149 title and the insurance company: 150 a. Has obtained the release of all liens on the motor 151 vehicle or mobile home; 152 b. Has provided proof of payment of the total loss claim; 153 and 154 c. Has provided an affidavit on letterhead signed by the 155 insurance company or its authorized agent stating the attempts 156 that have been made to obtain the title from the owner or 157 lienholder and further stating that all attempts are to no 158 avail. The affidavit must include a request that the salvage certificate of title or certificate of destruction be issued in 159 160 the insurance company's name due to payment of a total loss 161 claim to the owner or lienholder. The attempts to contact the 162 owner may be by written request delivered in person or by first-163 class mail with a certificate of mailing to the owner's or 164 lienholder's last known address. 165 2. If the owner or lienholder is notified of the request 166 for title in person, the insurance company must provide an 167 affidavit attesting to the in-person request for a certificate 168 of title. 169 3. The request to the owner or lienholder for the 170 certificate of title must include a complete description of the 171 motor vehicle or mobile home and the statement that a total loss

172 claim has been paid on the motor vehicle or mobile home. 173 (d) An electronic signature that is in accordance with 174 chapter 668 satisfies any signature requirement under this

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175	subsection.
176	Section 4. Subsection (2) of section 440.381, Florida
177	Statutes, is amended to read:
178	440.381 Application for coverage; reporting payroll;
179	payroll audit procedures; penalties
180	(2) Submission of an application that contains false,
181	misleading, or incomplete information provided with the purpose
182	of avoiding or reducing the amount of premiums for workers'
183	compensation coverage is a felony of the <u>third</u> <del>second</del> degree,
184	punishable as provided in s. 775.082, s. 775.083, or s. 775.084.
185	The application must contain a statement that the filing of an
186	application containing false, misleading, or incomplete
187	information provided with the purpose of avoiding or reducing
188	the amount of premiums for workers' compensation coverage is a
189	felony of the third degree, punishable as provided in s.
190	775.082, s. 775.083, or s. 775.084. The application must contain
191	a sworn statement by the employer attesting to the accuracy of
192	the information submitted and acknowledging the provisions of
193	former s. 440.37(4). The application must contain a sworn
194	statement by the agent attesting that the agent explained to the
195	employer or officer the classification codes that are used for
196	premium calculations. The sworn statements by the employer and
197	the agent are not required to be notarized.
198	Section 5. Section 624.1055, Florida Statutes, is created
199	to read:
200	624.1055 Right of contribution among insurers for defense
201	costs.—A liability insurer that owes a duty to defend an insured
202	and that defends the insured against a claim, suit, or other
203	action has a right of contribution for defense costs against any
I	

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204	other liability insurer that owes a duty to defend the insured
205	against the same claim, suit, or other action, provided that
206	contribution may not be sought from any insurer for defense
207	costs incurred before the insurer's receipt of notice of the
208	claim, suit, or other action.
209	(1) APPORTIONMENT OF COSTSThe court shall allocate
210	defense costs among insurers that owe a duty to defend the
211	insured against the same claim, suit, or other action in
212	accordance with the terms of the insurance policies. The court
213	may use such equitable factors as the court determines are
214	appropriate in making such allocation.
215	(2) ENFORCEMENT OF RIGHT OF CONTRIBUTIONA liability
216	insurer that is entitled to contribution from another insurer
217	under this section may file an action for contribution in a
218	court of competent jurisdiction.
219	(3) CONSTRUCTION
220	(a) This section is not intended to alter any term of a
221	liability insurance policy or to create any additional duty on
222	the part of an insurer to an insured.
223	(b) An insured may not rely on this section as grounds for
224	a complaint against an insurer.
225	(4) APPLICABILITY.—
226	(a) This section applies to liability insurance policies
227	issued for delivery in this state or to liability insurance
228	policies under which an insurer has a duty to defend an insured
229	against claims asserted or suits or actions filed in this state.
230	Such liability insurance policies include surplus lines
231	insurance policies authorized under the Surplus Lines Law, ss.
232	626.913-626.937. This section does not apply to motor vehicle

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233	liability insurance or medical professional liability insurance.
234	(b) This section applies to any claim, suit, or other
235	action initiated on or after January 1, 2020.
236	Section 6. Subsection (3) of section 624.155, Florida
237	Statutes, is amended to read:
238	624.155 Civil remedy
239	(3)(a) As a condition precedent to bringing an action under
240	this section, the department and the authorized insurer must
241	have been given 60 days' written notice of the violation. <del>If the</del>
242	department returns a notice for lack of specificity, the 60-day
243	time period shall not begin until a proper notice is filed.
244	(b) The notice shall be on a form provided by the
245	department and shall state with specificity the following
246	information, and such other information as the department may
247	require:
248	1. The statutory provision, including the specific language
249	of the statute, which the authorized insurer allegedly violated.
250	2. The facts and circumstances giving rise to the
251	violation.
252	3. The name of any individual involved in the violation.
253	4. Reference to specific policy language that is relevant
254	to the violation, if any. If the person bringing the civil
255	action is a third party claimant, she or he shall not be
256	required to reference the specific policy language if the
257	authorized insurer has not provided a copy of the policy to the
258	third party claimant pursuant to written request.
259	5. A statement that the notice is given in order to perfect
260	the right to pursue the civil remedy authorized by this section.
261	(c) Within 20 days of receipt of the notice, the department

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597-04033-19 2019714c3 262 may return any notice that does not provide the specific 263 information required by this section, and the department shall 264 indicate the specific deficiencies contained in the notice. A 265 determination by the department to return a notice for lack of 266 specificity shall be exempt from the requirements of chapter 267 <del>120.</del> 268 (c) (d) No action shall lie if, within 60 days after filing 269 notice, the damages are paid or the circumstances giving rise to 270 the violation are corrected. 271 (d) (e) The authorized insurer that is the recipient of a 272 notice filed pursuant to this section shall report to the 273 department on the disposition of the alleged violation. 274 (e) (f) The applicable statute of limitations for an action 275 under this section shall be tolled for a period of 65 days by 276 the mailing of the notice required by this subsection or the 277 mailing of a subsequent notice required by this subsection. 278 (f) A notice required under this subsection may not be 279 filed within 60 days after appraisal is invoked by any party in 280 a residential property insurance claim. 281 Section 7. Subsection (2) of section 624.404, Florida 282 Statutes, is amended to read: 283 624.404 General eligibility of insurers for certificate of 284 authority.-To qualify for and hold authority to transact insurance in this state, an insurer must be otherwise in 285 286 compliance with this code and with its charter powers and must 287 be an incorporated stock insurer, an incorporated mutual 288 insurer, or a reciprocal insurer, of the same general type as 289 may be formed as a domestic insurer under this code; except 290 that:

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291	(2) A <del>No</del> foreign or alien insurer or exchange may not <del>shall</del>
292	be authorized to transact insurance in this state unless it is
293	otherwise qualified therefor under this code and has operated
294	satisfactorily for at least 3 years in its state or country of
295	domicile; however, the office may waive the 3-year requirement
296	if the foreign or alien insurer or exchange:
297	(a) Has operated successfully and has capital and surplus
298	of \$5 million;
299	(b) Is the wholly owned subsidiary of an insurer which is
300	an authorized insurer in this state;
301	(c) Is the successor in interest through merger or
302	consolidation of an authorized insurer; <del>or</del>
303	(d) Provides a product or service not readily available to
304	the consumers of this state <u>; or</u>
305	(e) Possesses sufficient capital and surplus to support its
306	plan of operation as filed with the office.
307	Section 8. Paragraphs (d) and (e) of subsection (2) of
308	section 624.4085, Florida Statutes, are amended, and paragraph
309	(g) of subsection (1) of that section is republished, to read:
310	624.4085 Risk-based capital requirements for insurers
311	(1) As used in this section, the term:
312	(g) "Life and health insurer" means an insurer authorized
313	or eligible under the Florida Insurance Code to underwrite life
314	or health insurance. The term includes a property and casualty
315	insurer that writes accident and health insurance only.
316	Effective January 1, 2015, the term also includes a health
317	maintenance organization that is authorized in this state and
318	one or more other states, jurisdictions, or countries and a
319	prepaid limited health service organization that is authorized

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320	in this state and one or more other states, jurisdictions, or
321	countries.
322	(2)
323	(d) A life and health insurer's risk-based capital is
324	determined in accordance with the formula set forth in the risk-
325	based capital instructions. The formula takes into account and
326	may adjust for the covariance between:
327	1. The risk with respect to the insurer's assets;
328	2. The risk of adverse insurance experience with respect to
329	the insurer's liabilities and obligations;
330	3. The interest rate risk with respect to the insurer's
331	business; and
332	4. Any other business or other relevant risk set out in the
333	risk-based capital instructions,
334	
335	determined in each case by applying the factors in the manner
336	set forth in the risk-based capital instructions. This paragraph
337	does not apply to a health maintenance organization or a prepaid
338	limited health service organization.
339	(e) The risk-based capital of a property and casualty
340	insurer, and, if a health maintenance organization or prepaid
341	limited health service organization is subject to this section
342	pursuant to paragraph (1)(g), the risk-based capital of such
343	organization, insurer's risk-based capital is determined in
344	accordance with the formula set forth in the risk-based capital
345	instructions. The formula takes into account and may adjust for
346	the covariance between:
347	1. The asset risk;
348	2. The credit risk;

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349	3. The underwriting risk; and
350	4. Any other business or other relevant risk set out in the
351	risk-based capital instructions,
352	
353	determined in each case by applying the factors in the manner
354	set forth in the risk-based capital instructions.
355	Section 9. Subsection (4) of section 626.914, Florida
356	Statutes, is amended to read:
357	626.914 Definitions.—As used in this Surplus Lines Law, the
358	term:
359	(4) "Diligent effort" means seeking coverage from and
360	having been rejected by at least three authorized insurers
361	currently writing this type of coverage and documenting these
362	rejections. However, if the residential structure has a dwelling
363	replacement cost of $\$700,000$ $\$1$ million or more, the term means
364	seeking coverage from and having been rejected by at least one
365	authorized insurer currently writing this type of coverage and
366	documenting this rejection.
367	Section 10. Paragraph (d) of subsection (3) of section
368	627.062, Florida Statutes, is amended to read:
369	627.062 Rate standards
370	(3)
371	(d)1. Personal lines residential property insurance with a
372	dwelling replacement limit of \$700,000 or more which is written
373	or renewed pursuant to s. 627.1711 and the following categories
374	or kinds of insurance and types of commercial lines risks are
375	not subject to paragraph (2)(a) or paragraph (2)(f):
376	a. Excess or umbrella.
377	b. Surety and fidelity.

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378	c. Boiler and machinery and leakage and fire extinguishing
379	equipment.
380	d. Errors and omissions.
381	e. Directors and officers, employment practices, fiduciary
382	liability, and management liability.
383	f. Intellectual property and patent infringement liability.
384	g. Advertising injury and Internet liability insurance.
385	h. Property risks rated under a highly protected risks
386	rating plan.
387	i. General liability.
388	j. Nonresidential property, except for collateral
389	protection insurance as defined in s. 624.6085.
390	k. Nonresidential multiperil.
391	1. Excess property.
392	m. Burglary and theft.
393	n. Travel insurance, if issued as a master group policy
394	with a situs in another state where each certificateholder pays
395	less than \$30 in premium for each covered trip and where the
396	insurer has written less than \$1 million in annual written
397	premiums in the travel insurance product in this state during
398	the most recent calendar year.
399	o. Medical malpractice for a facility that is not a
400	hospital licensed under chapter 395, a nursing home licensed
401	under part II of chapter 400, or an assisted living facility
402	licensed under part I of chapter 429.
403	p. Medical malpractice for a health care practitioner who
404	is not a dentist licensed under chapter 466, a physician
405	licensed under chapter 458, an osteopathic physician licensed
406	under chapter 459, a chiropractic physician licensed under

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597-04033-19 2019714c3 407 chapter 460, a podiatric physician licensed under chapter 461, a 408 pharmacist licensed under chapter 465, or a pharmacy technician 409 registered under chapter 465. 410 q. Any other commercial lines categories or kinds of 411 insurance or types of commercial lines risks that the office 412 determines should not be subject to paragraph (2)(a) or 413 paragraph (2)(f) because of the existence of a competitive 414 market for such insurance or similarity of such insurance to other categories or kinds of insurance not subject to paragraph 415 416 (2) (a) or paragraph (2) (f), or to improve the general 417 operational efficiency of the office. 418 2. Insurers or rating organizations shall establish and use 419 rates, rating schedules, or rating manuals to allow the insurer a reasonable rate of return on insurance and risks described in 420 421 subparagraph 1. which are written in this state. 422 3. An insurer shall notify the office of any changes to 423 rates for insurance and risks described in subparagraph 1. 424 within 30 days after the effective date of the change. The 425 notice must include the name of the insurer, the type or kind of 426 insurance subject to rate change, and the average statewide 427 percentage change in rates. Actuarial data with regard to rates 428 for such risks must be maintained by the insurer for 2 years 429 after the effective date of changes to those rates and are 430 subject to examination by the office. The office may require the 431 insurer to incur the costs associated with an examination. Upon 432 examination, the office, in accordance with generally accepted 433 and reasonable actuarial techniques, shall consider the rate

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factors in paragraphs (2)(b), (c), and (d) and the standards in

paragraph (2)(e) to determine if the rate is excessive,

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436 inadequate, or unfairly discriminatory.

437 4. A rating organization shall notify the office of any 438 changes to loss cost for insurance and risks described in 439 subparagraph 1. within 30 days after the effective date of the 440 change. The notice must include the name of the rating organization, the type or kind of insurance subject to a loss 441 442 cost change, loss costs during the immediately preceding year 443 for the type or kind of insurance subject to the loss cost change, and the average statewide percentage change in loss 444 445 cost. Actuarial data with regard to changes to loss cost for risks not subject to paragraph (2)(a) or paragraph (2)(f) must 446 447 be maintained by the rating organization for 2 years after the 448 effective date of the change and are subject to examination by 449 the office. The office may require the rating organization to 450 incur the costs associated with an examination. Upon 451 examination, the office, in accordance with generally accepted 452 and reasonable actuarial techniques, shall consider the rate 453 factors in paragraphs (2)(b)-(d) and the standards in paragraph 454 (2) (e) to determine if the rate is excessive, inadequate, or 455 unfairly discriminatory.

456 Section 11. Section 627.1711, Florida Statutes, is created 457 to read:

458 <u>627.1711 Alternative personal lines residential property</u>
459 <u>insurance rates.-In each calendar year, the sum of personal</u>
460 <u>lines residential property insurance policies issued or renewed</u>
461 <u>by an insurer using rates established under s. 627.062(3)(d)</u>
462 <u>plus personal lines residential property insurance policies</u>
463 <u>issued or renewed using rates established under s. 627.171 may</u>
464 not exceed 5 percent of all personal lines residential insurance

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597-04033-19 2019714c3 465 policies written or renewed by the insurer. 466 Section 12. Subsection (1) of section 627.4102, Florida 467 Statutes, is amended to read: 468 627.4102 Informational filing of forms.-469 (1) Property and casualty forms, excluding except workers' 470 compensation and personal lines forms, but including residential 471 property insurance with rates established pursuant to s. 472 627.062(3)(d), are exempt from the approval process required 473 under s. 627.410 if: 474 (a) The form has been electronically submitted to the 475 office in an informational filing made through I-File 30 days 476 before the delivery or issuance for delivery of the form within 477 this state; and 478 (b) At the time the informational filing is made, a notarized certification is attached to the filing that certifies 479 480 that each form within the filing is in compliance with all 481 applicable state laws and rules. The certification must be on 482 the insurer's letterhead and signed and dated by the insurer's 483 president, chief executive officer, general counsel, or an 484 employee of the insurer responsible for the filing on behalf of 485 the insurer. The certification must contain the following 486 statement, and no other language: "I, ... (name)..., as 487 ... (title) ... of ... (insurer name) ..., do hereby certify that 488 this form filing has been thoroughly and diligently reviewed by 489 me and by all appropriate company personnel, as well as company 490 consultants, if applicable, and certify that each form contained 491 within the filing is in compliance with all applicable Florida 492 laws and rules. Should a form be found not to be in compliance with Florida laws and rules, I acknowledge that the Office of 493

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494	Insurance Regulation shall disapprove the form."
495	Section 13. Paragraph (b) of subsection (3) and subsection
496	(4) of section 626.916, Florida Statutes, are amended, and
497	subsection (5) is added to that section, to read:
498	626.916 Eligibility for export
499	(3)
500	(b) Except for personal lines insurance covering a
501	residential structure that has a dwelling replacement cost of
502	<pre>\$700,000 or more, paragraphs (1)(a)-(d) do not apply to classes</pre>
503	of insurance which are subject to s. 627.062(3)(d)1. These
504	classes may be exportable under the following conditions:
505	1. The insurance must be placed only by or through a
506	surplus lines agent licensed in this state;
507	2. The insurer must be made eligible under s. 626.918; and
508	3. The insured must sign a disclosure that substantially
509	provides the following: "You are agreeing to place coverage in
510	the surplus lines market. Superior coverage may be available in
511	the admitted market and at a lesser cost. Persons insured by
512	surplus lines carriers are not protected under the Florida
513	Insurance Guaranty Act with respect to any right of recovery for
514	the obligation of an insolvent unlicensed insurer." If the
515	notice is signed by the insured, the insured is presumed to have
516	been informed and to know that other coverage may be available,
517	and, with respect to the diligent-effort requirement under
518	subsection (1), there is no liability on the part of, and no
519	cause of action arises against, the retail agent presenting the
520	form.
1	

521 (4) A reasonable per-policy fee, not to exceed \$35, may be
522 charged by the filing surplus lines agent for each policy

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523				
	certified for export. The per-policy fee must be itemized			
524	separately to the customer before purchase and must be			
525	enumerated in the policy.			
526	(5) A retail agent may charge a reasonable per-policy fee			
527	for placement of a surplus lines policy under this section. The			
528	per-policy fee must be itemized separately to the customer			
529	before purchase.			
530	Section 14. Paragraph (m) of subsection (1) of section			
531	626.9541, Florida Statutes, is amended to read:			
532	626.9541 Unfair methods of competition and unfair or			
533	deceptive acts or practices defined			
534	(1) UNFAIR METHODS OF COMPETITION AND UNFAIR OR DECEPTIVE			
535	ACTSThe following are defined as unfair methods of competition			
536	and unfair or deceptive acts or practices:			
537	(m) <u>Permissible</u> advertising and promotional gifts <u>,</u> and			
538	charitable contributions, and loss mitigation services or loss			
539	<u>control items</u> <del>permitted</del>			
540	1. <del>The provisions of</del> Paragraph (f), paragraph (g), or			
541	paragraph (h) do not prohibit a licensed insurer or its agent			
542	from:			
543	a. Giving to insureds, prospective insureds, or others any			
544	article of merchandise, goods, wares, store gift cards, gift			
545	certificates, event tickets, anti-fraud or loss mitigation			
546	services, or other items having a total value of \$100 or less			
547	per insured or prospective insured in any calendar year.			
548	b. Making charitable contributions, as defined in s. 170(c)			
549	of the Internal Revenue Code, on behalf of insureds or			
550	prospective insureds, of up to \$100 per insured or prospective			
551	insured in any calendar year.			

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552	c. Giving to insureds, for free or at a discounted price,			
553	loss mitigation services or loss control items of value that			
554	relate to the risks covered under the policy.			
555	2. <del>The provisions of</del> Paragraph (f), paragraph (g), or			
556	paragraph (h) do not prohibit a title insurance agent or title			
557	insurance agency, as those terms are defined in s. 626.841, or a			
558	title insurer, as defined in s. 627.7711, from giving to			
559	insureds, prospective insureds, or others, for the purpose of			
560	advertising, any article of merchandise having a value of not			
561	more than \$25. A person or entity governed by this subparagraph			
562	is not subject to subparagraph 1.			
563	Section 15. Section 627.0655, Florida Statutes, is amended			
564	to read:			
565	627.0655 Policyholder loss or expense-related premium			
566	discountsAn insurer or person authorized to engage in the			
567	business of insurance in this state may include, in the premium			
568	charged an insured for any policy, contract, or certificate of			
569	insurance, <u>an actuarially sound</u> <del>a</del> discount based on the fact			
570	that another policy, contract, or certificate of any type has			
571	been purchased by the insured from <u>:</u>			
572	(1) The same insurer or insurer group, or another insurer			
573	under a joint marketing agreement;			
574	(2) The Citizens Property Insurance Corporation created			
575	under s. 627.351(6), if the same insurance agent is servicing			
576	both policies <u>;, or</u>			
577	(3) An insurer that has removed the policy from the			
578	Citizens Property Insurance Corporation <u>or issued a policy</u>			
579	pursuant to the clearinghouse program under s. 627.3518, if the			
580	same insurance agent is servicing both policies; or			

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581	(4) An insurer, if the same insurance agent is servicing
582	the policies.
583	Section 16. Subsection (2) of section 627.426, Florida
584	Statutes, is amended to read:
585	627.426 Claims administration.—
586	(2) A liability insurer shall not be permitted to deny
587	coverage based on a particular coverage defense unless:
588	(a) Within 30 days after the liability insurer knew or
589	should have known of the coverage defense, written notice of
590	reservation of rights to assert a coverage defense is given to
591	the named insured by <u>United States postal proof of mailing,</u>
592	registered or certified mail, or other mailing using the
593	Intelligent Mail barcode or other similar tracking method used
594	or approved by the United States Postal Service, sent to the
595	last known address of the insured, or by hand delivery; and
596	(b) Within 60 days of compliance with paragraph (a) or
597	receipt of a summons and complaint naming the insured as a
598	defendant, whichever is later, but in no case later than 30 days
599	before trial, the insurer:
600	1. Gives written notice to the named insured by <u>United</u>
601	States postal proof of mailing, registered or certified mail, or
602	other mailing using the Intelligent Mail barcode or other
603	similar tracking method used or approved by the United States
604	Postal Service, of its refusal to defend the insured;
605	2. Obtains from the insured a nonwaiver agreement following
606	full disclosure of the specific facts and policy provisions upon
607	which the coverage defense is asserted and the duties,
608	obligations, and liabilities of the insurer during and following
609	the pendency of the subject litigation; or

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597-04033-19 2019714c3 610 3. Retains independent counsel which is mutually agreeable 611 to the parties. Reasonable fees for the counsel may be agreed upon between the parties or, if no agreement is reached, shall 612 613 be set by the court. 614 Section 17. Section 627.4555, Florida Statutes, is amended 615 to read: 616 627.4555 Secondary notice.-617 (1) Except as provided in this section, a contract for life insurance issued or issued for delivery in this state on or 618 619 after October 1, 1997, covering a natural person 64 years of age 620 or older, which has been in force for at least 1 year, may not be lapsed for nonpayment of premium unless, after expiration of 621 622 the grace period, and at least 21 days before the effective date 623 of any such lapse, the insurer has mailed a notification of the 624 impending lapse in coverage to the policyowner and to a 625 specified secondary addressee if such addressee has been 626 designated in writing by name and address by the policyowner. An 627 insurer issuing a life insurance contract on or after October 1, 628 1997, shall notify the applicant of the right to designate a 629 secondary addressee at the time of application for the policy, 630 on a form provided by the insurer, and at any time the policy is 631 in force, by submitting a written notice to the insurer 632 containing the name and address of the secondary addressee. For 633 purposes of any life insurance policy that provides a grace 634 period of more than 51 days for nonpayment of premiums, the 635 notice of impending lapse in coverage required by this section 636 must be mailed to the policyowner and the secondary addressee at 637 least 21 days before the expiration of the grace period provided 638 in the policy. This section does not apply to any life insurance

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639	contract under which premiums are payable monthly or more				
640					
641	are paid by credit card or any preauthorized check processing or				
642	automatic debit service of a financial institution.				
643	(2) If the policyowner has a life agent of record or any				
644	agent of record, the insurer must also notify the agent of the				
645	impending lapse in coverage or mail or send electronically a				
646	copy of the notification of the impending lapse in coverage				
647	under subsection (1) to the agent at least 21 days before the				
648	effective date of any such lapse. Receipt of such notice does				
649	not make the agent responsible for any lapse in coverage. An				
650	insurer is not required to notify the agent under this				
651	subsection if any of the following applies:				
652	(a) The insurer maintains an online system that allows an				
653	agent to independently determine if a policy has lapsed.				
654	(b) The insurer maintains a procedure that allows an agent				
655	to independently determine whether the notice of lapse has been				
656	sent to the insured.				
657	(c) The insurer has no record of the current agent of				
658	record.				
659	(d) The agent is employed by the insurer or an affiliate of				
660	the insurer.				
661	Section 18. Subsection (2) of section 627.7015, Florida				
662	Statutes, is amended to read:				
663	627.7015 Alternative procedure for resolution of disputed				
664	property insurance claims				
665	(2) At the time of issuance and renewal of a policy or at				
666	the time a first-party claim within the scope of this section is				
667	filed by the policyholder, the insurer shall notify the				

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597-04033-19 2019714c3 668 policyholder of its right to participate in the mediation 669 program under this section. The department shall prepare a 670 consumer information pamphlet for distribution to persons 671 participating in mediation. 672 Section 19. Subsection (7) of section 627.7295, Florida 673 Statutes, is amended to read: 674 627.7295 Motor vehicle insurance contracts.-675 (7) A policy of private passenger motor vehicle insurance or a binder for such a policy may be initially issued in this 676 677 state only if, before the effective date of such binder or 678 policy, the insurer or agent has collected from the insured an 679 amount equal to at least 1 month's 2 months' premium. An 680 insurer, agent, or premium finance company may not, directly or 681 indirectly, take any action resulting in the insured having paid from the insured's own funds an amount less than the 1 month's  $\frac{2}{2}$ 682 683 months' premium required by this subsection. This subsection 684 applies without regard to whether the premium is financed by a 685 premium finance company or is paid pursuant to a periodic 686 payment plan of an insurer or an insurance agent. This 687 subsection does not apply if an insured or member of the 688 insured's family is renewing or replacing a policy or a binder 689 for such policy written by the same insurer or a member of the 690 same insurer group. This subsection does not apply to an insurer 691 that issues private passenger motor vehicle coverage primarily 692 to active duty or former military personnel or their dependents. 693 This subsection does not apply if all policy payments are paid 694 pursuant to a payroll deduction plan, an automatic electronic 695 funds transfer payment plan from the policyholder, or a 696 recurring credit card or debit card agreement with the insurer.

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697	This subsection and sub	bsection (4) do n	not apply if all policy			
698	payments to an insurer are paid pursuant to an automatic					
699	electronic funds trans	fer payment plan	from an agent, a managing			
700	general agent, or a pr	emium finance com	mpany and if the policy			
701	includes, at a minimum	cludes, at a minimum, personal injury protection pursuant to				
702	ss. 627.730-627.7405; 1	motor vehicle pro	operty damage liability			
703	pursuant to s. 627.727	5; and bodily in	jury liability in at least			
704	the amount of \$10,000	because of bodil	y injury to, or death of,			
705	one person in any one	accident and in <sup>.</sup>	the amount of \$20,000			
706	because of bodily inju	ry to, or death o	of, two or more persons in			
707	any one accident. This	subsection and	subsection (4) do not			
708	apply if an insured ha	s had a policy in	n effect for at least 6			
709	months, the insured's	agent is termina <sup>.</sup>	ted by the insurer that			
710	issued the policy, and the insured obtains coverage on the					
711	policy's renewal date with a new company through the terminated					
712	agent.					
713	Section 20. Paragraph (e) of subsection (3) of section					
714	921.0022, Florida Statutes, is amended to read:					
715	921.0022 Criminal	Punishment Code	; offense severity ranking			
716	chart					
717	(3) OFFENSE SEVER	ITY RANKING CHAR	Г			
718	(e) LEVEL 5					
719						
	Florida	Felony				
	Statute	Degree	Description			
720						
	316.027(2)(a)	3rd	Accidents involving			
			personal injuries other			
			than serious bodily			

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i	597-04033-19		2019714c3
			injury, failure to stop;
			leaving scene.
721			
	316.1935(4)(a)	2nd	Aggravated fleeing or
			eluding.
722			
	316.80(2)	2nd	Unlawful conveyance of
			fuel; obtaining fuel
723			fraudulently.
125	322.34(6)	3rd	Careless operation of
	022.01(0)	514	motor vehicle with
			suspended license,
			resulting in death or
			serious bodily injury.
724			
	327.30(5)	3rd	Vessel accidents
			involving personal
			injury; leaving scene.
725			
	379.365(2)(c)1.	3rd	Violation of rules
			relating to: willful
			molestation of stone
			crab traps, lines, or
			buoys; illegal
			bartering, trading, or
			sale, conspiring or aiding in such barter,
			trade, or sale, or
			crade, or sale, or

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			supplying, agreeing to
			supply, aiding in
			supplying, or giving
			away stone crab trap
			tags or certificates;
			making, altering,
			forging, counterfeiting,
			or reproducing stone
			crab trap tags;
			possession of forged,
			counterfeit, or
			imitation stone crab
			trap tags; and engaging
			in the commercial
			harvest of stone crabs
			while license is
			suspended or revoked.
726			
	379.367(4)	3rd	Willful molestation of a
			commercial harvester's
			spiny lobster trap,
			line, or buoy.
727			
	379.407(5)(b)3.	3rd	Possession of 100 or
			more undersized spiny
			lobsters.
728			
	381.0041(11)(b)	3rd	Donate blood, plasma, or
			organs knowing HIV
I			

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	597-04033-19		2019714c3 positive.
729	440.10(1)(g)	2nd	Failure to obtain workers' compensation coverage.
730	440.105(5)	2nd	Unlawful solicitation for the purpose of making workers' compensation claims.
732	440.381(2)	<u>3rd</u> <del>2nd</del>	Submission of false, misleading, or incomplete information with the purpose of avoiding or reducing workers' compensation premiums.
733	624.401(4)(b)2.	2nd	Transacting insurance without a certificate or authority; premium collected \$20,000 or more but less than \$100,000.
	626.902(1)(c)	2nd	Representing an unauthorized insurer; repeat offender.

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734	597-04033-19		2019714c3
735	790.01(2)	3rd	Carrying a concealed firearm.
736	790.162	2nd	Threat to throw or discharge destructive device.
	790.163(1)	2nd	False report of bomb, explosive, weapon of mass destruction, or use of firearms in violent manner.
737	790.221(1)	2nd	Possession of short- barreled shotgun or machine gun.
	790.23	2nd	Felons in possession of firearms, ammunition, or electronic weapons or devices.
739	796.05(1)	2nd	Live on earnings of a prostitute; 1st offense.
740	800.04(6)(c)	3rd	Lewd or lascivious conduct; offender less than 18 years of age.

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741	597-04033-19		2019714c3
742	800.04(7)(b)	2nd	Lewd or lascivious exhibition; offender 18 years of age or older.
	806.111(1)	3rd	Possess, manufacture, or dispense fire bomb with intent to damage any structure or property.
743	812.0145(2)(b)	2nd	Theft from person 65 years of age or older; \$10,000 or more but less than \$50,000.
745	812.015(8)	3rd	Retail theft; property stolen is valued at \$300 or more and one or more specified acts.
	812.019(1)	2nd	Stolen property; dealing in or trafficking in.
746	812.131(2)(b)	3rd	Robbery by sudden snatching.
747 748	812.16(2)	3rd	Owning, operating, or conducting a chop shop.
I			

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749	817.034(4)(a)2.	2nd	Communications fraud, value \$20,000 to \$50,000.
750	817.234(11)(b)	2nd	Insurance fraud; property value \$20,000 or more but less than \$100,000.
, 50	817.2341(1),	3rd	Filing false financial statements, making false
	(2)(a) & (3)(a)		entries of material fact or false statements regarding property values relating to the solvency of an insuring entity.
751	817.568(2)(b)	2nd	Fraudulent use of personal identification information; value of benefit, services received, payment avoided, or amount of injury or fraud, \$5,000 or more or use of personal identification information of 10 or more persons.

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752	597-04033-19		2019714c3
753	817.611(2)(a)	2nd	Traffic in or possess 5 to 14 counterfeit credit cards or related documents.
754	817.625(2)(b)	2nd	Second or subsequent fraudulent use of scanning device, skimming device, or reencoder.
755	825.1025(4)	3rd	Lewd or lascivious exhibition in the presence of an elderly person or disabled adult.
756	827.071(4)	2nd	Possess with intent to promote any photographic material, motion picture, etc., which includes sexual conduct by a child.
, 50	827.071(5)	3rd	Possess, control, or intentionally view any photographic material, motion picture, etc.,

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757			which includes sexual conduct by a child.
758	828.12(2)	3rd	Tortures any animal with intent to inflict intense pain, serious physical injury, or death.
759	839.13(2)(b)	2nd	Falsifying records of an individual in the care and custody of a state agency involving great bodily harm or death.
760	843.01	3rd	Resist officer with violence to person; resist arrest with violence.
	847.0135(5)(b)	2nd	Lewd or lascivious exhibition using computer; offender 18 years or older.
761	847.0137	3rd	Transmission of pornography by
	(2) & (3)		electronic device or equipment.

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762	597-04033-19		2019714c3
763	847.0138 (2) & (3)	3rd	Transmission of material harmful to minors to a minor by electronic device or equipment.
764	874.05(1)(b)	2nd	Encouraging or recruiting another to join a criminal gang; second or subsequent offense.
765	874.05(2)(a)	2nd	Encouraging or recruiting person under 13 years of age to join a criminal gang.
766	893.13(1)(a)1.	2nd	<pre>Sell, manufacture, or deliver cocaine (or other s. 893.03(1)(a), (1)(b), (1)(d), (2)(a), (2)(b), or (2)(c)5. drugs).</pre>
	893.13(1)(c)2.	2nd	<pre>Sell, manufacture, or deliver cannabis (or other s. 893.03(1)(c), (2)(c)1., (2)(c)2., (2)(c)3., (2)(c)6.,</pre>

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			(2)(c)7., (2)(c)8.,
			(2)(c)9., (2)(c)10.,
			(3), or (4) drugs)
			within 1,000 feet of a
			child care facility,
			school, or state,
			county, or municipal
			park or publicly owned
			recreational facility or
			community center.
767			-
	893.13(1)(d)1.	1st	Sell, manufacture, or
			deliver cocaine (or
			other s. 893.03(1)(a),
			(1)(b), (1)(d), (2)(a),
			(2)(b), or (2)(c)5.
			drugs) within 1,000 feet
			of university.
768			
	893.13(1)(e)2.	2nd	Sell, manufacture, or
			deliver cannabis or
			other drug prohibited
			under s. 893.03(1)(c),
			(2)(c)1., (2)(c)2.,
			(2)(c)3., (2)(c)6.,
			(2)(c)7., (2)(c)8.,
			(2)(c)9., (2)(c)10.,
			(3), or (4) within 1,000
			feet of property used

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	597-04033-19		2019714c3
			for religious services
			or a specified business
			site.
769			
	893.13(1)(f)1.	1st	Sell, manufacture, or
			deliver cocaine (or
			other s. 893.03(1)(a),
			(1)(b), (1)(d), or
			(2)(a), (2)(b), or
			(2)(c)5. drugs) within
			1,000 feet of public
			housing facility.
770			
	893.13(4)(b)	2nd	Use or hire of minor;
			deliver to minor other
			controlled substance.
771			
	893.1351(1)	3rd	Ownership, lease, or
			rental for trafficking
			in or manufacturing of
			controlled substance.
772			
773	Section 21. Except as otherwise expressly provided in this		
774	act and except for this section, which shall take effect upon		
775	this act becoming a law, this act shall take effect July 1,		
776	2019.		

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