House



LEGISLATIVE ACTION .

Senate

Floor: 19/F/2R 12/13/2022 03:34 PM

Senator Thompson moved the following:

Senate Amendment (with title amendment)

Delete lines 2400 - 2682

and insert:

(1) Upon the rendition of a judgment or decree by any of the courts of this state against an insurer and in favor of any named or omnibus insured or the named beneficiary under a policy or contract executed by the insurer, the trial court or, in the event of an appeal in which the insured or beneficiary prevails, the appellate court shall adjudge or decree against the insurer 11 and in favor of the insured or beneficiary a reasonable sum as

12/13/2022 10:34:54 AM

SENATOR AMENDMENT

Florida Senate - 2022 Bill No. SB 2-A

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12 fees or compensation for the insured's or beneficiary's attorney 13 prosecuting the suit in which the recovery is had. In a suit arising under a residential or commercial property insurance 14 15 policy, the amount of reasonable attorney fees shall be awarded only as provided in s. 57.105, or s. 627.70152, or s. 768.79, as 16 17 applicable. 18 (4) In a suit arising under a residential or commercial 19 property insurance policy, the right to attorney fees under this 20 section may not be transferred to, assigned to, or acquired in 21 any other manner by anyone other than a named or omnibus insured 22 or a named beneficiary. 23 Section 14. Paragraph (b) of subsection (4) of section 24 627.7011, Florida Statutes, is amended to read: 25 627.7011 Homeowners' policies; offer of replacement cost 26 coverage and law and ordinance coverage.-27 (4) 28 (b) An insurer that issues a homeowner's insurance policy 29 that does not provide flood insurance coverage must include on 30 the policy declarations page with the policy documents at initial issuance and every renewal, in bold type no smaller than 31 32 18 points, the following statement: 33 34 "FLOOD INSURANCE: YOU SHOULD MAY ALSO NEED TO CONSIDER THE PURCHASE OF FLOOD INSURANCE. YOUR HOMEOWNER'S 35 36 INSURANCE POLICY DOES NOT INCLUDE COVERAGE FOR DAMAGE 37 RESULTING FROM FLOOD EVEN IF HURRICANE WINDS AND RAIN 38 CAUSED THE FLOOD TO OCCUR. WITHOUT SEPARATE FLOOD INSURANCE COVERAGE, YOUR YOU MAY HAVE UNCOVERED LOSSES 39 CAUSED BY FLOOD ARE NOT COVERED. PLEASE DISCUSS THE 40

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41 NEED TO PURCHASE SEPARATE FLOOD INSURANCE COVERAGE42 WITH YOUR INSURANCE AGENT."

Section 15. Effective March 1, 2023, present subsection (8) of section 627.70131, Florida Statutes, is redesignated as subsection (9), a new subsection (8) is added to that section, and paragraph (a) of subsection (1), subsections (3), (4), and (5), and paragraph (a) of subsection (7) of that section are amended, to read:

627.70131 Insurer's duty to acknowledge communications regarding claims; investigation.-

52 (1) (a) Upon an insurer's receiving a communication with 53 respect to a claim, the insurer shall, within 7 $\frac{14}{14}$ calendar 54 days, review and acknowledge receipt of such communication 55 unless payment is made within that period of time or unless the 56 failure to acknowledge is caused by factors beyond the control 57 of the insurer which reasonably prevent such acknowledgment. If 58 the acknowledgment is not in writing, a notification indicating 59 acknowledgment shall be made in the insurer's claim file and 60 dated. A communication made to or by a representative of an 61 insurer with respect to a claim shall constitute communication 62 to or by the insurer.

(3) (a) Unless otherwise provided by the policy of insurance
or by law, within <u>7</u> 14 days after an insurer receives proof-ofloss statements, the insurer shall begin such investigation as
is reasonably necessary unless the failure to begin such
investigation is caused by factors beyond the control of the
insurer which reasonably prevent the commencement of such
investigation.



70 (b) If such investigation involves a physical inspection of 71 the property, the licensed adjuster assigned by the insurer must 72 provide the policyholder with a printed or electronic document 73 containing his or her name and state adjuster license number. 74 For claims other than those subject to a hurricane deductible, 75 An insurer must conduct any such physical inspection within 30 76 45 days after its receipt of the proof-of-loss statements. 77 (c) Any subsequent communication with the policyholder regarding the claim must also include the name and license 78 79 number of the adjuster communicating about the claim. 80 Communication of the adjuster's name and license number may be 81 included with other information provided to the policyholder. 82 (d) An insurer may use electronic methods to investigate 83 the loss. Such electronic methods may include any method that 84 provides the insurer with clear, color pictures or video documenting the loss, including, but not limited to, electronic 85 86 photographs or video recordings of the loss, video conferencing 87 between the adjuster and the policyholder which includes video 88 recording of the loss, and video recordings or photographs of 89 the loss using a drone, driverless vehicle, or other machine 90 that can move independently or through remote control. The 91 insurer also may allow the policyholder to use such methods to 92 assist in the investigation of the loss. An insurer may void the 93 insurance policy if the policyholder or any other person at the 94 direction of the policyholder, with intent to injure, defraud, or deceive any insurer, commits insurance fraud by providing 95 96 false, incomplete, or misleading information concerning any fact 97 or thing material to a claim using electronic methods. The use of electronic methods to investigate the loss does not prohibit 98

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99 an insurer from assigning a licensed adjuster to physically 100 inspect the property.

(e) Within 7 days after the insurer's assignment of an 101 102 adjuster to the claim, The insurer must send notify the 103 policyholder that he or she may request a copy of any detailed 104 estimate of the amount of the loss within 7 days after the 105 estimate is generated by an insurer's adjuster. After receiving 106 such a request from the policyholder, the insurer must send any such detailed estimate to the policyholder within the later of 7 107 108 days after the insurer received the request or 7 days after the 109 detailed estimate of the amount of the loss is completed. This 110 paragraph does not require that an insurer create a detailed 111 estimate of the amount of the loss if such estimate is not 112 reasonably necessary as part of the claim investigation.

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(4) An insurer shall maintain:

114 (a) A record or log of each adjuster who communicates with 115 the policyholder as provided in paragraphs (3)(b) and (c) and 116 provide a list of such adjusters to the insured, office, or 117 department upon request.

(b) Claim records, including dates, of:

1. Any claim-related communication made between the insurer and the policyholder or the policyholder's representative;

2. The insurer's receipt of the policyholder's proof of loss statement;

3. Any claim-related request for information made by the insurer to the policyholder or the policyholder's

representative;

4. Any claim-related inspections of the property made by 127 the insurer, including physical inspections and inspections made

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128	by electronic means;
129	5. Any detailed estimate of the amount of the loss
130	generated by the insurer's adjuster;
131	6. The beginning and end of any tolling period provided for
132	in subsection (8); and
133	7. The insurer's payment or denial of the claim.
134	(5) For purposes of this section, the term:
135	(a) "Factors beyond the control of the insurer" means:
136	1. Any of the following events that is the basis for the
137	office issuing an order finding that such event renders all or
138	specified residential property insurers reasonably unable to
139	meet the requirements of this section in specified locations and
140	ordering that such insurer or insurers may have additional time
141	as specified by the office to comply with the requirements of
142	this section: a state of emergency declared by the Governor
143	under s. 252.36, a breach of security that must be reported
144	under s. 501.171(3), or an information technology issue. The
145	office may not extend the period for payment or denial of a
146	claim for more than 30 additional days.
147	2. Actions by the policyholder or the policyholder's
148	representative which constitute fraud, lack of cooperation, or
149	intentional misrepresentation regarding the claim for which
150	benefits are owed when such actions reasonably prevent the
151	insurer from complying with any requirement of this section.
152	(b) "Insurer" means any residential property insurer.
153	(7)(a) Within <u>60</u> 90 days after an insurer receives notice
154	of an initial, reopened, or supplemental property insurance
155	claim from a policyholder, the insurer shall pay or deny such
156	claim or a portion of the claim unless the failure to pay is

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157 caused by factors beyond the control of the insurer which 158 reasonably prevent such payment. The insurer shall provide a 159 reasonable explanation in writing to the policyholder of the 160 basis in the insurance policy, in relation to the facts or 161 applicable law, for the payment, denial, or partial denial of a 162 claim. If the insurer's claim payment is less than specified in any insurer's detailed estimate of the amount of the loss, the 163 164 insurer must provide a reasonable explanation in writing of the 165 difference to the policyholder. Any payment of an initial or 166 supplemental claim or portion of such claim made 60 90 days after the insurer receives notice of the claim, or made more 167 than 15 days after the expiration of any additional timeframe 168 169 provided to pay or deny a claim or a portion of a claim made 170 pursuant to an order of the office finding there are no longer 171 factors beyond the control of the insurer which reasonably 172 prevented such payment, whichever is later, bears interest at the rate set forth in s. 55.03. Interest begins to accrue from 173 the date the insurer receives notice of the claim. The 174 175 provisions of this subsection may not be waived, voided, or 176 nullified by the terms of the insurance policy. If there is a 177 right to prejudgment interest, the insured must select whether 178 to receive prejudgment interest or interest under this 179 subsection. Interest is payable when the claim or portion of the claim is paid. Failure to comply with this subsection 180 181 constitutes a violation of this code. However, failure to comply 182 with this subsection does not form the sole basis for a private 183 cause of action.

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(8) The requirements of this section are tolled:(a) During the pendency of any mediation proceeding under

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186 <u>s. 627.7015 or any alternative dispute resolution proceeding</u> 187 <u>provided for in the insurance contract. The tolling period ends</u> 188 <u>upon the end of the mediation or alternative dispute resolution</u> 189 <u>proceeding.</u>

190 (b) Upon the failure of a policyholder or a representative 191 of the policyholder to provide material claims information 192 requested by the insurer within 10 days after the request was 193 received. The tolling period ends upon the insurer's receipt of the requested information. Tolling under this paragraph applies 194 195 only to requests sent by the insurer to the policyholder or a 196 representative of the policyholder at least 15 days before the 197 insurer is required to pay or deny the claim or a portion of the 198 claim under subsection (7).

Section 16. Subsection (2) of section 627.70132, Florida Statutes, is amended to read:

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627.70132 Notice of property insurance claim.-

202 (2) A claim or reopened claim, but not a supplemental 203 claim, under an insurance policy that provides property 204 insurance, as defined in s. 624.604, including a property 205 insurance policy issued by an eligible surplus lines insurer, 206 for loss or damage caused by any peril is barred unless notice 207 of the claim was given to the insurer in accordance with the 208 terms of the policy within 1 year 2 years after the date of loss. A supplemental claim is barred unless notice of the 209 210 supplemental claim was given to the insurer in accordance with 211 the terms of the policy within 18 months 3 years after the date 212 of loss.

213 Section 17. Subsection (1) of section 627.70152, Florida 214 Statutes, is amended to read:

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215	627.70152 Suits arising under a property insurance policy
216	(1) APPLICATIONThis section applies exclusively to all
217	suits not brought by an assignee arising under a residential or
218	commercial property insurance policy, including a residential or
219	commercial property insurance policy issued by an eligible
220	surplus lines insurer.
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222	=========== T I T L E A M E N D M E N T ==============
223	And the title is amended as follows:
224	Delete lines 99 - 125
225	and insert:
226	627.428, F.S.; revising conditions under which
227	attorney fees may be awarded in suits arising under a
228	residential or commercial property insurance policy;
229	deleting a restriction on transferring, assigning, or
230	acquiring a certain right to attorney fees; amending
231	s. 627.7011, F.S.; revising disclosure requirements
232	relating to flood insurance for insurers issuing
233	homeowners' policies; amending s. 627.70131, F.S.;
234	revising requirements for insurers relating to
235	acknowledging communications regarding claims,
236	investigating claims, sending estimates of losses to
237	policyholders, recordkeeping, and paying or denying
238	claims; authorizing insurers to use specified methods
239	in investigating losses; authorizing insurers to void
240	insurance policies under certain circumstances;
241	defining the term "factors beyond the control of the
242	insurer"; specifying circumstances under which certain
243	requirements are tolled; providing construction;

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amending s. 627.70132, F.S.; revising timeframes under which notices of claims, reopened claims, and supplemental claims under property insurance policies must be given to insurers or be barred; amending s. 627.70152, F.S.; revising applicability of provisions relating to suits arising under a property insurance policy; creating s. 627.70154, F.S.; specifying