A bill to be entitled

An act relating to insurance claims; amending s. 626.854, F.S.; providing that an assignment or agreement that transfers authority to adjust, negotiate or settle a claim is void; amending s. 627.405, F.S.; prohibiting assignment of an insurable interest except to subsequent purchasers after a loss; amending s. 627.422, F.S.; authorizing an insurance policy to prohibit assignment of post-loss benefits; providing exceptions; amending s. 627.70131, F.S.; decreasing timeframes for acknowledging and paying claims; amending s. 627.7142, F.S.; making conforming changes to the Homeowner's Bill of Rights; providing an effective date.

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

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Section 1. Subsection (16) of section 626.854, Florida Statutes, is amended to read:

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626.854 "Public adjuster" defined; prohibitions.—The Legislature finds that it is necessary for the protection of the public to regulate public insurance adjusters and to prevent the unauthorized practice of law.

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(16) (a) A licensed contractor under part I of chapter 489, or a subcontractor, may not adjust a claim on behalf of an insured unless licensed and compliant as a public adjuster under

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Page 1 of 11

PCS for HB 669

this chapter. However, the contractor may discuss or explain a bid for construction or repair of covered property with the residential property owner who has suffered loss or damage covered by a property insurance policy, or the insurer of such property, if the contractor is doing so for the usual and customary fees applicable to the work to be performed as stated in the contract between the contractor and the insured.

(b) Any assignment or agreement that purports to transfer the authority to adjust, negotiate, or settle any portion of a claim to such contractor or subcontractor, or that is otherwise in derogation of this section, is void.

Section 2. Section 627.405, Florida Statutes, is amended to read:

627.405 Insurable interest; property.-

- (1) No contract of insurance of property or of any interest in property or arising from property shall be enforceable as to the insurance except for the benefit of persons having an insurable interest in the things insured as at the time of the loss.
- (2) "Insurable interest" as used in this section means any actual, lawful, and substantial economic interest in the safety or preservation of the subject of the insurance free from loss, destruction, or pecuniary damage or impairment.
- (3) The measure of an insurable interest in property is the extent to which the insured might be damnified by loss, injury, or impairment thereof.

Page 2 of 11

PCS for HB 669

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- (4) Insurable interest does not survive an assignment, except to a subsequent purchaser of the property who acquires insurable interest following a loss.
- Section 3. Section 627.422, Florida Statutes, is amended to read:
- 627.422 Assignment of policies; restrictions on post-loss assignment of benefits.—
- (1) A policy may be assignable, or not assignable, as provided by its terms. Subject to its terms relating to assignability, any life or health insurance policy under the terms of which the beneficiary may be changed upon the sole request of the policyowner may be assigned either by pledge or transfer of title, by an assignment executed by the policyowner alone and delivered to the insurer, whether or not the pledgee or assignee is the insurer. Any such assignment shall entitle the insurer to deal with the assignee as the owner or pledgee of the policy in accordance with the terms of the assignment, until the insurer has received at its home office written notice of termination of the assignment or pledge or written notice by or on behalf of some other person claiming some interest in the policy in conflict with the assignment.
- (2) A property insurance policy may prohibit the post-loss assignment of rights, benefits, causes of action, or other contractual rights under the policy, except:
- (a) An insured may assign the benefit of payment not to exceed \$3,000 to a person or entity providing services or

Page 3 of 11

PCS for HB 669

materials to mitigate or repair damage directly arising from a covered loss. The assignment is limited solely to the ability to be named as a copayee for the benefit of payment for the reasonable value of services rendered and materials provided to mitigate or repair such damage. The insured may not assign the right to enforce payment of the post-loss benefits contained in the policy.

- (b) For the limited purpose of compensating a public adjuster for services authorized by s. 626.854(11). The assignment is only for compensation due to the public adjuster by the insured and not for the remainder of the benefits due to the insured under the policy. Nothing in this paragraph changes the obligations, if any, of the insurer to issue the insured a check for payment in the name of the insured or mortgage holder.
- (c) For payment of an attorney representing the insured, wherein the assignment contemplates only that the benefits are paid to the attorney representing the insured, and that the attorney will disperse the funds to repair the property at the direction of the insured.
- (3) Any post-loss assignment of rights, benefits, causes of action, or other contractual rights in contravention of this section renders the assignment void.

Section 4. Subsections (1), (2), (3), and (4) and paragraph (a) of subsection (5) of section 627.70131, Florida Statutes, are amended to read:

627.70131 Insurer's duty to acknowledge communications

Page 4 of 11

PCS for HB 669

regarding claims; investigation.-

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- Upon an insurer's receiving a communication with respect to a claim, the insurer shall, within 14 7 calendar days, review and acknowledge receipt of such communication unless payment is made within that period of time or unless the failure to acknowledge is caused by factors beyond the control of the insurer which reasonably prevent such acknowledgment. If the acknowledgment is not in writing, a notification indicating acknowledgment shall be made in the insurer's claim file and dated. A communication made to or by an agent of an insurer with respect to a claim shall constitute communication to or by the insurer. If a residential property insurer receives a communication in writing from a third party identified in s. 627.422(2)(a)-(c) with respect to the claim requesting that the insurer acknowledge the existence of a policy of insurance on the property, the insurer shall respond within (7 days of the request answering the communication. If the insurer's acknowledgment is not in writing, a notification indicating acknowledgment shall be made in the insurer's claim file and dated.
- (b) As used in this subsection, the term "agent" means any person to whom an insurer has granted authority or responsibility to receive or make such communications with respect to claims on behalf of the insurer.
- (c) This subsection shall not apply to claimants represented by counsel beyond those communications necessary to

Page 5 of 11

PCS for HB 669

provide forms and instructions.

- (2) Such acknowledgment shall be responsive to the communication. If the communication constitutes a notification of a claim, unless the acknowledgment reasonably advises the claimant that the claim appears not to be covered by the insurer, the acknowledgment shall provide necessary claim forms, and instructions, including an appropriate telephone number.
- (3) Unless otherwise provided by the policy of insurance or by law, within 10 working days after an insurer receives proof of loss 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.
- (4) For purposes of this section, the term "insurer" means any residential property insurer.
- (5) (a) Within 90 45 days after an insurer receives notice of an initial, reopened, or supplemental property insurance claim from a policyholder, the insurer shall pay or deny such claim or a portion of the claim unless the failure to pay is caused by factors beyond the control of the insurer which reasonably prevent such payment. Any payment of an initial or supplemental claim or portion of such claim made 90 45 days after the insurer receives notice of the claim, or made more than 15 days after there are no longer factors beyond the control of the insurer which reasonably prevented such payment,

Page 6 of 11

PCS for HB 669

whichever is later, bears interest at the rate set forth in s. 55.03. Interest begins to accrue from the date the insurer receives notice of the claim. The provisions of this subsection may not be waived, voided, or nullified by the terms of the insurance policy. If there is a right to prejudgment interest, the insured shall select whether to receive prejudgment interest or interest under this subsection. Interest is payable when the claim or portion of the claim is paid. Failure to comply with this subsection constitutes a violation of this code. However, failure to comply with this subsection does not form the sole basis for a private cause of action.

Section 5. Section 627.7142, Florida Statutes, is amended to read:

627.7142 Homeowner Claims Bill of Rights.—An insurer issuing a personal lines residential property insurance policy in this state must provide a Homeowner Claims Bill of Rights to a policyholder within 144.7 days after receiving an initial communication with respect to a claim, unless the claim follows an event that is the subject of a declaration of a state of emergency by the Governor. The purpose of the bill of rights is to summarize, in simple, nontechnical terms, existing Florida law regarding the rights of a personal lines residential property insurance policyholder who files a claim of loss. The Homeowner Claims Bill of Rights is specific to the claims process and does not represent all of a policyholder's rights under Florida law regarding the insurance policy. The Homeowner

Page 7 of 11

# PCS for HB 669

Claims Bill of Rights does not create a civil cause of action by any individual policyholder or class of policyholders against an insurer or insurers. The failure of an insurer to properly deliver the Homeowner Claims Bill of Rights is subject to administrative enforcement by the office but is not admissible as evidence in a civil action against an insurer. The Homeowner Claims Bill of Rights does not enlarge, modify, or contravene statutory requirements, including, but not limited to, ss. 626.854, 626.9541, 627.70131, 627.7015, and 627.7074, and does not prohibit an insurer from exercising its right to repair damaged property in compliance with the terms of an applicable policy or ss. 627.7011(5)(e) and 627.702(7). The Homeowner Claims Bill of Rights must state:

## HOMEOWNER CLAIMS

#### BILL OF RIGHTS

This Bill of Rights is specific to the claims process and does not represent all of your rights under Florida law regarding your policy. There are also exceptions to the stated timelines when conditions are beyond your insurance company's control. This document does not create a civil cause of action by an individual policyholder, or a class of policyholders, against an insurer or insurers and does not prohibit an insurer from exercising its right to repair damaged property in compliance with the terms of an applicable policy.

YOU HAVE THE RIGHT TO:

Page 8 of 11

## PCS for HB 669

- 1. Receive from your insurance company an acknowledgment of your reported claim within  $\frac{14}{7}$  days after the time you communicated the claim.
- 2. Upon written request, receive from your insurance company within 30 15 days after you have submitted a complete proof-of-loss statement to your insurance company, confirmation that your claim is covered in full, partially covered, or denied, or receive a written statement that your claim is being investigated.
- 3. Within 90 45 days, subject to any dual interest noted in the policy, receive full settlement payment for your claim or payment of the undisputed portion of your claim, or your insurance company's denial of your claim.
- 4. Free mediation of your disputed claim by the Florida Department of Financial Services, Division of Consumer Services, under most circumstances and subject to certain restrictions.
- 5. Neutral evaluation of your disputed claim, if your claim is for damage caused by a sinkhole and is covered by your policy.
- 6. Contact the Florida Department of Financial Services, Division of Consumer Services' toll-free helpline for assistance with any insurance claim or questions pertaining to the handling of your claim. You can reach the Helpline by phone at...(toll-free phone number)..., or you can seek assistance online at the Florida Department of Financial

Page 9 of 11

PCS for HB 669

234	Services,	Division	of	Consumer	Services'	website
235	at(website address)					

## YOU ARE ADVISED TO:

- 1. Contact your insurance company before entering into any contract for repairs to confirm any managed repair policy provisions or optional preferred vendors.
- 2. Make and document emergency repairs that are necessary to prevent further damage. Keep the damaged property, if feasible, keep all receipts, and take photographs of damage before and after any repairs.
- 3. Carefully read any contract that requires you to pay out-of-pocket expenses or a fee that is based on a percentage of the insurance proceeds that you will receive for repairing or replacing your property.
- 4. Confirm that the contractor you choose is licensed to do business in Florida. You can verify a contractor's license and check to see if there are any complaints against him or her by calling the Florida Department of Business and Professional Regulation. You should also ask the contractor for references from previous work.
- 5. Require all contractors to provide proof of insurance before beginning repairs.
- 6. Take precautions if the damage requires you to leave your home, including securing your property and turning off your gas, water, and electricity, and contacting your insurance company and provide a phone number where you can

Page 10 of 11

# PCS for HB 669

260 be reached.

Section 6. This act shall take effect July 1, 2015.

262

Page 11 of 11

PCS for HB 669

CODING: Words  $\frac{\text{stricken}}{\text{stricken}}$  are deletions; words  $\frac{\text{underlined}}{\text{ore}}$  are additions.