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	COMMITTEE/SUBCOMMITTEE	ACTION
ADOPT	ED	(Y/N)
ADOPT	ED AS AMENDED	(Y/N)
ADOPT	ED W/O OBJECTION	(Y/N)
FAILE	D TO ADOPT	(Y/N)
WITHD	RAWN	(Y/N)
OTHER		

Committee/Subcommittee hearing bill: Commerce Committee Representative Griffitts offered the following:

Amendment (with title amendment)

Remove lines 435-576 and insert:

Policy Terms." and must be in bold type of not less than 14 points and must be included as a single page or consecutive pages, as necessary, within the written notice.

Section 10. Section 627.6426, Florida Statutes, is amended to read:

627.6426 Short-term health insurance.-

(1) For purposes of this part, the term "short-term health insurance" means health insurance coverage provided by an issuer with an expiration date specified in the contract that is less than 12 months after the original effective date of the contract

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and, taking into account renewals or extensions, has a duration not to exceed 36 months in total.

(2) All contracts for short-term health insurance entered into by an issuer and an individual seeking coverage shall include the following written disclosures signed by the purchaser at the time of purchase disclosure:

(a) The following statement:

"This coverage is not required to comply with certain federal market requirements for health insurance, principally those contained in the Patient Protection and Affordable Care Act. Be sure to check your policy carefully to make sure you are aware of any exclusions or limitations regarding coverage of preexisting conditions or health benefits (such as hospitalization, emergency services, maternity care, preventive care, prescription drugs, and mental health and substance use disorder services). Your policy might also have lifetime and/or annual dollar limits on health benefits. If this coverage expires or you lose eligibility for this coverage, you might have to wait until an open enrollment period to get other health insurance coverage."

(b) The following information:

1. The duration of the contract, including any waiting period.

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41	2. Any essential health benefit under 42 U.S.C. s.
42	18022(b) that the contract does not provide.
43	3. The content of coverage.
44	4. Any exclusion of preexisting conditions.
45	(3) The disclosures required in subsection (2) must be
46	printed in no less than 12-point type and in a color that is
47	readable. A copy of the signed disclosures must be maintained by
48	the issuer for a period of 5 years after the date of purchase.
49	(4) Disclosures provided by electronic means must meet the
50	requirements of subsection (2).
51	Section 11. Subsection (4) of section 627.70132, Florida
52	Statutes, is renumbered as subsection (5), and a new subsection
53	(4) is added to that section to read:
54	627.70132 Notice of property insurance claim
55	(4)(a) A notice of claim for loss assessment coverage
56	under s. 627.714 may not occur later than 3 years after the date
57	of loss and must be provided to the insurer the later of:
58	1. Within 1 year after the date of loss; or
59	2. Within 90 days after the date on which the condominium
60	association or its governing board votes to levy an assessment
61	resulting from a covered loss.

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assessment.

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(b) For purposes of this subsection, the date of loss is

the date of the covered loss event that created the need for an

6.5

	Section 12.	Section	655.49,	Florida	Statutes,	is	created
to	read:						

- 655.49 Bad faith termination or restriction of account access; investigations by the office.—
- (1) A customer or member of a financial institution who reasonably believes that a financial institution has terminated, suspended, or taken similar action restricting access to the customer's or member's account in bad faith may file, within 30 calendar days after such termination, suspension, or similar action restricting account access, a complaint with the office alleging a violation of this section. Such complaint is barred if not timely filed.
- (2) This section does not apply if a financial institution's termination, suspension, or similar action restricting a customer's or member's account access was due to one or more of the following:
 - (a) The customer or member initiated the change in access;
 - (b) There is a lack of activity in the account; or
- (c) The account is presumed unclaimed property pursuant to chapter 717.
- (3) Upon receipt of a customer's or member's complaint under subsection (1):
- (a) Within 30 calendar days, the office must notify the financial institution that a complaint has been filed.

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- (b) Within 30 calendar days after receiving the notice from the office, the financial institution must file with the office a termination-of-access report containing such information as the commission requires by rule.
- (c) Within 90 calendar days after receiving the termination-of-access report from the financial institution, the office must investigate the financial institution's action and determine whether the action was taken in bad faith as substantiated by competent and substantial evidence that was known or should have been known to the financial institution at the time of the termination, suspension, or similar action restricting a customer's or member's account access.
- (d) Within 30 calendar days after making the determination required under paragraph (c), the office must report to the Attorney General and the Chief Financial Officer the determination of a bad faith termination, suspension, or similar action restricting a customer's or member's account access. The report to the Attorney General must describe the findings of the investigation, provide a summary of the evidence, and state whether an alleged violation of the financial institutions codes by the financial institution occurred. Upon reporting to the Attorney General pursuant to this paragraph, the office must send a copy of the report to the customer or member by certified mail, return receipt requested.

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(4) A financial institution's bad faith termination,
suspension, or similar action restricting access to a customer's
or member's account, as determined by the office pursuant to
subsection (3), or a financial institution's failure to
cooperate in an investigation conducted pursuant to subsection
(3), including, without limitation, failure to timely file a
termination-of-access report with the office, constitutes a
violation of the financial institutions codes and subjects the
financial institution to the applicable sanctions and penalties
provided for in the financial institutions codes.

- (5) The office shall provide any report filed pursuant to this section, or any information contained therein, to any federal, state, or local law enforcement or prosecutorial agency, and any federal or state agency responsible for the regulation or supervision of financial institutions, if the provision of such report is otherwise required by law.
- (6) If the office determines under subsection (3) that a financial institution has acted in bad faith, the aggrieved customer or member of the financial institution has a cause of action against the financial institution for damages and may recover damages therefor in any court of competent jurisdiction, together with costs and reasonable attorney fees to be assessed by the court. To recover damages under this subsection, the customer or member must establish that, beyond a reasonable doubt, the financial institution acted in bad faith in

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terminating, suspending, or taking similar action restricting
access to the customer's or member's account. The office's
determination that the financial institution has acted in bad
faith pursuant to subsection (3) does not, in and of itself,
establish beyond a reasonable doubt that the financial
institution acted in bad faith in the termination, suspension,
or similar action restricting access to the customer's or
member's account. A customer's or member's failure to initiate a
cause of action under this subsection within 12 months after the
office's finding of bad faith pursuant to subsection (3) bars
recovery of any filed claims thereafter.

(7) By July 1, 2024, the office shall make available on its website the information necessary for a customer or member of a financial institution to file a complaint with the office under subsection (1).

Section 13. Paragraph (a) of subsection (4) of section 791.01, Florida Statutes, is amended to read:

791.01 Definitions.—As used in this chapter, the term:

(4)(a) "Fireworks" means and includes any combustible or explosive composition or substance or combination of substances or, except as hereinafter provided, any article prepared for the purpose of producing a visible or audible effect by combustion, explosion, deflagration, or detonation. The term includes blank cartridges and toy cannons in which explosives are used, the type of balloons which require fire underneath to propel them,

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firecrackers, torpedoes, skyrockets, Roman candles, dage bombs, and any fireworks containing any explosives or flammable compound or any tablets or other device containing any explosive substance.

TITLE AMENDMENT

Remove lines 46-78 and insert:
insurance; amending s. 627.70132, F.S.; providing requirements
for notices of claims for loss assessment coverage; providing
dates of loss; creating s. 655.49, F.S.; authorizing customers
and members of financial institutions to file certain complaints
with the Office of Financial Regulation; providing
nonapplicability; providing duties of the office upon receipt of
such complaints; providing reporting requirements; providing
violations; requiring the office to provide reports to certain
entities; providing causes of action; providing construction;
requiring the office to make certain information available on
its website; amending s. 791.01, F.S.; revising the definition
of the term "fireworks"; amending s. 791.012, F.S.; updating the

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