A bill to be entitled

An act relating to foster care providers; amending s. 409.1671, F.S.; decreasing the limits of liability and requisite insurance coverage for lead community-based providers and subcontractors; providing immunity from liability for the Department of Children and Family Services for acts or omissions of a community-based provider or subcontractor, or the officers, agents, or employees thereof; providing an effective date.

WHEREAS, lead community-based providers were established to provide foster care and related services, and

WHEREAS, the goal of establishing these providers was to strengthen the support and commitment of communities to the reunification of families and the care of children and families and to increase the efficiency and accountability of providers, and

WHEREAS, lead community-based providers provide services identical to those previously provided by the Department of Children and Family Services, which was protected when delivering those services by the state's sovereign immunity limits, and

WHEREAS, the costs of litigation and attorney's fees diminishes the resources available to the children and families served by lead community-based providers, and

WHEREAS, the Legislature finds that the limits of liability for lead community-based providers should be reviewed, NOW, THEREFORE,

Page 1 of 8

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

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Section 1. Paragraphs (f), (h), (j), and (l) of subsection (1) and paragraph (a) of subsection (2) of section 409.1671, Florida Statutes, are amended to read:

409.1671 Foster care and related services; outsourcing.—
(1)

The Legislature finds that the state has traditionally provided foster care services to children who have been the responsibility of the state. As such, foster children have not had the right to recover for injuries beyond the limitations specified in s. 768.28. The Legislature has determined that foster care and related services need to be outsourced pursuant to this section and that the provision of such services is of paramount importance to the state. The purpose for such outsourcing is to increase the level of safety, security, and stability of children who are or become the responsibility of the state. One of the components necessary to secure a safe and stable environment for such children is that private providers maintain liability insurance. As such, insurance needs to be available and remain available to nongovernmental foster care and related services providers without the resources of such providers being significantly reduced by the cost of maintaining such insurance. To ensure that these resources are not significantly reduced, specified limits of liability are necessary for eligible lead communitybased providers and subcontractors engaged in the provision of

services previously performed by the Department of Children and Family Services.

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- 2. The Legislature further finds that, by requiring the following minimum levels of insurance, children in outsourced foster care and related services will gain increased protection and rights of recovery in the event of injury than provided for in s. 768.28.
- (h) Other than an entity to which s. 768.28 applies, any eligible lead community-based provider, as defined in paragraph (e), or its employees or officers, except as otherwise provided in paragraph (i), must, as a part of its contract, obtain general liability coverage for a minimum of \$500,000 \$1 million per claim with a policy limit aggregate of \neq \$1.5 \\$3 million per incident in general liability insurance coverage. The eliqible lead community-based provider must also require that staff who transport client children and families in their personal automobiles in order to carry out their job responsibilities obtain minimum bodily injury liability insurance in the amount of \$100,000 per claim, \$300,000 per incident, on their personal automobiles. In lieu of personal motor vehicle insurance, the lead community-based provider's casualty, liability, or motor vehicle insurance carrier may provide nonowned automobile liability coverage. This insurance provides liability insurance for automobiles that the provider uses in connection with the provider's business but does not own, lease, rent, or borrow. This coverage includes automobiles owned by the employees of the provider or a member of the employee's household but only while the automobiles are used in connection with the provider's

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business. The nonowned automobile coverage for the provider applies as excess coverage over any other collectible insurance. The personal automobile policy for the employee of the provider shall be primary insurance, and the nonowned automobile coverage of the provider acts as excess insurance to the primary insurance. The provider shall provide a minimum limit of \$1 million in nonowned automobile coverage. In any tort action brought against such an eligible lead community-based provider or employee, net economic damages shall be limited to \$500,000 \$1 million per liability claim, \$1.5 million per liability incident, and \$100,000 per automobile claim, including, but not limited to, past and future medical expenses, wage loss, and loss of earning capacity, offset by any collateral source payment paid or payable. In any tort action brought against an eligible lead community-based provider, the total economic damages recoverable by all claimants shall be limited to no more than \$2 million against all lead agencies and subcontractors involved in the same incident or occurrence, when totaled together. In any tort action brought against such an eligible lead community-based provider, noneconomic damages shall be limited to \$200,000 per claim and \$500,000 per incident. In any tort action brought against an eligible lead community-based provider, the total noneconomic damages recoverable by all claimants shall be limited to no more than \$1 million against all subcontractors and lead agencies involved in the same incident or occurrence, when totaled together. A claims bill may be brought on behalf of a claimant pursuant to s. 768.28 for any amount exceeding the limits specified in this paragraph. Any

Page 4 of 8

offset of collateral source payments made as of the date of the settlement or judgment shall be in accordance with s. 768.76. The lead community-based provider <u>is shall</u> not be liable in tort for the acts or omissions of its subcontractors or the officers, agents, or employees of its subcontractors.

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(j) Any subcontractor of an eligible lead community-based provider, as defined in paragraph (e), which is a direct provider of foster care and related services to children and families, and its employees or officers, except as otherwise provided in paragraph (i), must, as a part of its contract, obtain general liability insurance coverage for a minimum of \$500,000 $\frac{1}{2}$ million per claim with a policy limit aggregate of \$1.5 \(\frac{\frac{4}}{3}\) million \(\frac{\text{per incident}}{\text{in general liability insurance}}\) coverage. The subcontractor of an eligible lead community-based provider must also require that staff who transport client children and families in their personal automobiles in order to carry out their job responsibilities obtain minimum bodily injury liability insurance in the amount of \$100,000 per claim, \$300,000 per incident, on their personal automobiles. In lieu of personal motor vehicle insurance, the subcontractor's casualty, liability, or motor vehicle insurance carrier may provide nonowned automobile liability coverage. This insurance provides liability insurance for automobiles that the subcontractor uses in connection with the subcontractor's business but does not own, lease, rent, or borrow. This coverage includes automobiles owned by the employees of the subcontractor or a member of the employee's household but only while the automobiles are used in connection with the subcontractor's business. The nonowned

141 automobile coverage for the subcontractor applies as excess 142 coverage over any other collectible insurance. The personal 143 automobile policy for the employee of the subcontractor shall be 144 primary insurance, and the nonowned automobile coverage of the 145 subcontractor acts as excess insurance to the primary insurance. 146 The subcontractor shall provide a minimum limit of \$1 million in 147 nonowned automobile coverage. In any tort action brought against such subcontractor or employee, net economic damages shall be 148 149 limited to \$500,000 \$1 million per liability claim, \$1.5 million per liability incident, and \$100,000 per automobile claim, 150 151 including, but not limited to, past and future medical expenses, 152 wage loss, and loss of earning capacity, offset by any 153 collateral source payment paid or payable. In any tort action brought against such subcontractor or employee, the total 154 155 economic damages recoverable by all claimants shall be limited 156 to no more than \$2 million against all subcontractors and lead 157 agencies involved in the same incident or occurrence, when 158 totaled together. In any tort action brought against such 159 subcontractor, noneconomic damages shall be limited to \$200,000 160 per claim and \$500,000 per incident. In any tort action brought 161 against such subcontractor or employee, the total noneconomic 162 damages recoverable by all claimants shall be limited to no more 163 than \$1 million against all subcontractors and lead agencies 164 involved in the same incident or occurrence, when totaled 165 together. A claims bill may be brought on behalf of a claimant 166 pursuant to s. 768.28 for any amount exceeding the limits specified in this paragraph. Any offset of collateral source 167 payments made as of the date of the settlement or judgment shall 168

Page 6 of 8

CODING: Words stricken are deletions; words underlined are additions.

be in accordance with s. 768.76.

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of goods and services each year and recognizes that fixing a set amount of compensation actually has the effect of a reduction in compensation each year. Accordingly, the conditional limitations on damages in this section shall be increased at the rate of 5 percent each year, prorated from the effective date of this paragraph to the date at which damages subject to such limitations are awarded by final judgment or settlement.

(2)(a) The department may contract for the delivery, administration, or management of protective services, the services specified in subsection (1) relating to foster care, and other related services or programs, as appropriate. The department shall use diligent efforts to ensure that retain responsibility for the quality of contracted services and programs and shall ensure that services are of high quality and delivered in accordance with applicable federal and state statutes and regulations. However, the department is not liable in tort for the acts or omissions of an eligible lead communitybased provider or the officers, agents, or employees of the provider, nor is the department liable in tort for the acts or omissions of the subcontractors of eligible lead community-based providers or the officers, agents, or employees of its subcontractors. The department may not require an eligible lead community-based provider or its subcontractors to indemnify the department for the department's own acts or omissions, nor may the department require an eligible lead community-based provider or its subcontractors to include the department as an additional

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insured on any insurance policy. The department must adopt written policies and procedures for monitoring the contract for delivery of services by lead community-based providers. These policies and procedures must, at a minimum, address the evaluation of fiscal accountability and program operations, including provider achievement of performance standards, provider monitoring of subcontractors, and timely followup of corrective actions for significant monitoring findings related to providers and subcontractors. These policies and procedures must also include provisions for reducing the duplication of the department's program monitoring activities both internally and with other agencies, to the extent possible. The department's written procedures must ensure that the written findings, conclusions, and recommendations from monitoring the contract for services of lead community-based providers are communicated to the director of the provider agency as expeditiously as possible.

Section 2. This act shall take effect July 1, 2011.